

**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

EMILY's List

ADDRESS (number and street)

1120 Connecticut Avenue NW

Ste 1100

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00193433

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

05

01

2007

through

05

31

2007

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

Type or Print Name of Treasurer

Fines, Caroline

Signature of Treasurer

Electronically Filed by Fines, Caroline

Date

07

11

2007

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
EMILY's List

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	5		0	1		2	0	0	7

To:

M	M		D	D		Y	Y	Y	Y
0	5		3	1		2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y 2007</span>		260369.37
(b) Cash on Hand at Beginning of Reporting Period .....	1469132.07	
(c) Total Receipts (from Line 19) .....	1504714.41	7699685.20
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2973846.48	7960054.57
7. Total Disbursements (from Line 31) .....	1341955.92	6328164.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1631890.56	1631890.56
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

EMILY's List

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	645160.53	3163066.45
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	434210.80	2624246.63
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	1079371.33	5787313.08
(b) Political Party Committees .....	0.00	1500.00
(c) Other Political Committees (such as PACs) .....	2588.04	32273.85
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	1081959.37	5821086.93
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) .....	9490.82	121566.10
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	7672.27	27205.73
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	405591.95	1729826.44
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	405591.95	1729826.44
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1504714.41	7699685.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1099122.46	5969858.76

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	362838.83	1818226.55
(i) Federal Share.....		
(ii) Non-Federal Share.....	363687.70	1808145.77
(b) Other Federal Operating Expenditures.....	613049.39	2440560.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	1339575.92	6066932.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	510.00	34334.52
24. Independent Expenditure (use Schedule E) .....	0.00	-5467.72
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	200000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1870.00	10112.00
(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)) .....	1870.00	10112.00
29. Other Disbursements.....	0.00	22252.50
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))..	1341955.92	6328164.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	978268.22	4520018.24

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 5

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) .....	1081959.37	5821086.93
34. Total Contribution Refunds (from Line 28(d)) .....	1870.00	10112.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1080089.37	5810974.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	975888.22	4258786.94
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	9490.82	121566.10
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	966397.40	4137220.84

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

EMILY's List

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

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NAME OF COMMITTEE (In Full)

**EMILY's List****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

**Fundraising/PSP 2007**

ACTIVITY IS:

☒ Fundraising ☐ Direct Candidate Support

CHECK IF THE RATIO IS:

☐ New ☐ Revised ☒ Same as Previously Reported

FEDERAL %

**50.00** %

NONFEDERAL %

**50.00** %**Transaction ID:**  
H2-EL-1149

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Merrill Lynch-NF#1

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

400.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

400.00

Transaction ID: H3-EL-1150

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Bank of America-NF-  
 #3

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

176387.84

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

173702.85

Transaction ID: H3-EL-1151

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) PSP07

2684.99

Transaction ID: H3-EL-1152

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

2684.99

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Merrill Lynch-NF#4

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

19877.56

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

19223.93

Transaction ID: H3-EL-1153

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) PSP07

653.63

Transaction ID: H3-EL-1154

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

653.63

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Merrill Lynch-NF#1

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

1071.83

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1071.83

Transaction ID: H3-EL-1155

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Merrill Lynch-NF#4

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

28449.83

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

24522.86

Transaction ID: H3-EL-1156

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) PSP07

3926.97

Transaction ID: H3-EL-1157

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

3926.97

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Merrill Lynch-NF#1

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

3934.20

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

3683.03

Transaction ID: H3-EL-1158

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) PSP07

251.17

Transaction ID: H3-EL-1159

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

251.17

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Merrill Lynch-NF#4

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

105160.18

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

105160.18

Transaction ID: H3-EL-1160

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Merrill Lynch-NF#4

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

63277.01

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

61998.41

Transaction ID: H3-EL-1161

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) PSP07

1278.60

Transaction ID: H3-EL-1162

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

1278.60

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

NAME OF ACCOUNT  
 Merrill Lynch-NF#1

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

7033.50

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

7033.50

Transaction ID: H3-EL-1163

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

396796.59

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

8795.36

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

405591.95



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Quiyana Washington

## Mailing Address

6974 Hanover Parkway Unit 300

City State Zip Code

Greenbelt MD 20770

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2822891.02

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	1	/	2	0	0	7

Transaction ID: H4-109547

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

400.00

400.00

800.00

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

John Hancock c/o City Bank Delaware

## Mailing Address

1615 Brett Road Lock Box 7122

City State Zip Code

New Castle DE 19720

Purpose of Disbursement:  
Employment Pension/ 401(k)Category/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2836202.60

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	1	/	2	0	0	7

Transaction ID: H4-110220

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6655.79

6655.79

13311.58

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

Calpeek Attn: Marketplace Network

## Mailing Address

P.O. Box 1468

City State Zip Code

Beverly Hills CA 90213

Purpose of Disbursement:  
Publication & DuesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2836377.60

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	3	/	2	0	0	7

Transaction ID: H4-109566

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

87.50

87.50

175.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7143.29

7143.29

14286.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Campaign Team, Inc. c/o Anna Lidman

Mailing Address

37 Brookview Terrace

City	State	Zip Code
Portland	ME	04102

Purpose of Disbursement:  
Copying/FaxingCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

77769.77

Date 05 / 03 / 2007

Transaction ID: H4-109567

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

**B. Full Name (Last, First, Middle Initial)**  
 Campaign Team, Inc. c/o Anna Lidman

Mailing Address

37 Brookview Terrace

City	State	Zip Code
Portland	ME	04102

Purpose of Disbursement:  
Local TransportationCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

77940.77

Date 05 / 03 / 2007

Transaction ID: H4-109568

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.50		85.50		171.00

**C. Full Name (Last, First, Middle Initial)**  
 Campaign Team, Inc. c/o Anna Lidman

Mailing Address

37 Brookview Terrace

City	State	Zip Code
Portland	ME	04102

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

78089.17

Date 05 / 03 / 2007

Transaction ID: H4-109569

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.20		74.20		148.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.20		167.20		334.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 19 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Contract Cleaning Services Inc JIB Service Group

## Mailing Address

1120 Connecticut Ave, NW 1200

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
Building Utilities & FeesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2836694.85

Date 05 / 03 / 2007

Transaction ID: H4-109571

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

158.62

158.63

317.25

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

Kathleen Coyne-McCoy

## Mailing Address

267 Gleaner Chapel Road

City State Zip Code

North Scituate RI 02857

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2836888.10

Date 05 / 03 / 2007

Transaction ID: H4-109574

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

96.62

96.63

193.25

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

Dell Financial Services Payment Processing Center

## Mailing Address

PO Box 5292

City State Zip Code

Carol Stream IL 60197-5292

Purpose of Disbursement:  
Furniture & Computer EquipmentCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2863201.92

Date 05 / 03 / 2007

Transaction ID: H4-109576

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13156.91

13156.91

26313.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13412.15

13412.17

26824.32

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Diverse Office Solutions

Mailing Address

9228 Gaither Road

City	State	Zip Code
Gaithersburg	MD	20877

Purpose of Disbursement:  
 Office Supplies Expenses

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2863623.86

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109579

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.97		210.97		421.94

**B. Full Name (Last, First, Middle Initial)**  
 Gilbert & Wolfand

Mailing Address

Suite 320 2201 Wisconsin Ave., NW

City	State	Zip Code
Washington,	DC	20007

Purpose of Disbursement:  
 Accounting

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2868183.86

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109581

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2280.00		2280.00		4560.00

**C. Full Name (Last, First, Middle Initial)**  
 IDT Telecom Data Inc.

Mailing Address

62 Belvedere Street

City	State	Zip Code
San Rafael	CA	94901-4817

Purpose of Disbursement:  
 Repairs Maintenance

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2868303.86

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109582

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		60.00		120.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2550.97		2550.97		5101.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Ikon Office Solutions

Mailing Address

P.O. Box 827468

City	State	Zip Code
Philadelphia	PA	19182-7468

Purpose of Disbursement:  
Equipment MaintenanceCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2868425.80

Date 05 / 03 / 2007

Transaction ID: H4-109583

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.97		60.97		121.94

**B. Full Name (Last, First, Middle Initial)**  
Rochelle Sachs Levin

Mailing Address

22800 SW 157th Avenue

City	State	Zip Code
Miami	FL	33170

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

78097.17

Date 05 / 03 / 2007

Transaction ID: H4-109585

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.00		4.00		8.00

**C. Full Name (Last, First, Middle Initial)**  
Rochelle Sachs Levin

Mailing Address

22800 SW 157th Avenue

City	State	Zip Code
Miami	FL	33170

Purpose of Disbursement:  
PostageCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

78099.48

Date 05 / 03 / 2007

Transaction ID: H4-109586

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.15		1.16		2.31

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.12		66.13		132.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Rochelle Sachs Levin

## Mailing Address

22800 SW 157th Avenue

City	State	Zip Code
Miami	FL	33170

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

78327.00

Date 05 / 03 / 2007

Transaction ID: H4-109587

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

113.76

113.76

227.52

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

Rochelle Sachs Levin

## Mailing Address

22800 SW 157th Avenue

City	State	Zip Code
Miami	FL	33170

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

78476.89

Date 05 / 03 / 2007

Transaction ID: H4-109588

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

74.94

74.95

149.89

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

MCI

## Mailing Address

P. O. Box 85053

City	State	Zip Code
Louisville	KY	40285

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

78516.30

Date 05 / 03 / 2007

Transaction ID: H4-109589

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.70

19.71

39.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

208.40

208.42

416.82

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Perkins Coie

Mailing Address

1201 Third Avenue 40th Floor

City	State	Zip Code
Seattle	WA	98101-3099

 Purpose of Disbursement:  
 Legal Services

Category/Type

 Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2869565.80

Date 05 / 03 / 2007

Transaction ID: H4-109590

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
570.00		570.00		1140.00

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

Mailing Address

1201 Third Avenue 40th Floor

City	State	Zip Code
Seattle	WA	98101-3099

 Purpose of Disbursement:  
 Legal Services

Category/Type

 Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2871961.80

Date 05 / 03 / 2007

Transaction ID: H4-109591

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1198.00		1198.00		2396.00

**C. Full Name (Last, First, Middle Initial)**  
 Production Solutions, Inc.

Mailing Address

1953 Gallows Road Suite 600

City	State	Zip Code
Vienna	VA	22182

 Purpose of Disbursement:  
 Office Supplies Expenses

Category/Type

 Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2872078.11

Date 05 / 03 / 2007

Transaction ID: H4-109592

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.15		58.16		116.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1826.15		1826.16		3652.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Production Solutions, Inc.

Mailing Address

1953 Gallows Road Suite 600

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:  
 Office Supplies Expenses

Category/  
Type

Activity or Event Identifier:  
 PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

78865.21

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109593

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

174.45

174.46

348.91

**B. Full Name (Last, First, Middle Initial)**  
 Progressive Wisconsin, Inc.

Mailing Address

203 S. Paterson St. Suite 400

City	State	Zip Code
Madison	WI	53704

Purpose of Disbursement:  
 Rent

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2873014.11

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109600

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

468.00

468.00

936.00

**C. Full Name (Last, First, Middle Initial)**  
 Progressive Wisconsin, Inc.

Mailing Address

203 S. Paterson St. Suite 400

City	State	Zip Code
Madison	WI	53704

Purpose of Disbursement:  
 Rent

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2873482.11

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109601

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

234.00

234.00

468.00

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

876.45

876.46

1752.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Progressive Wisconsin, Inc.

Mailing Address

203 S. Paterson St. Suite 400

City	State	Zip Code
Madison	WI	53704

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2873557.11

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109602

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.50

37.50

75.00

**B. Full Name (Last, First, Middle Initial)**  
 Progressive Wisconsin, Inc.

Mailing Address

203 S. Paterson St. Suite 400

City	State	Zip Code
Madison	WI	53704

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2873707.11

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109603

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

75.00

75.00

150.00

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

Mailing Address

1334-E Shepard Drive

City	State	Zip Code
Sterling	VA	20164-4426

Purpose of Disbursement:  
 Repairs Maintenance

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2873757.11

Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109604

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.00

25.00

50.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

137.50

137.50

275.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
United Parcel Service

Mailing Address

P. O. Box 7247-0244

City

Philadelphia

State

PA

Zip Code

19170-0001

Purpose of Disbursement:  
Deliveries

Category/  
Type

Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2873884.10

Date 05 / 03 / 2007

Transaction ID: H4-109617

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

63.49

63.50

126.99

**B. Full Name (Last, First, Middle Initial)**  
United Parcel Service

Mailing Address

P. O. Box 7247-0244

City

Philadelphia

State

PA

Zip Code

19170-0001

Purpose of Disbursement:  
Deliveries

Category/  
Type

Activity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79061.98

Date 05 / 03 / 2007

Transaction ID: H4-109618

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

98.38

98.39

196.77

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

Mailing Address

PO Box 790406

City

St. Louis

State

MO

Zip Code

63179-0406

Purpose of Disbursement:  
Telephone

Category/  
Type

Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2874000.40

Date 05 / 03 / 2007

Transaction ID: H4-109621

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

58.15

58.15

116.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

220.02

220.04

440.06

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Patricia Williams

## Mailing Address

3 Wyndham Drive

City State Zip Code

Portola Valley

CA

94028

Purpose of Disbursement:  
SalariesCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2874210.40

Activity or Event Identifier:  
AVD07Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109625

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.00

105.00

210.00

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

Working Assets

## Mailing Address

P.O. Box 2041

City State Zip Code

Mechanicsburg

PA

17055

Purpose of Disbursement:  
TelephoneCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2874421.49

Activity or Event Identifier:  
AVD07Date 

M	M
0	5

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109953

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.54

105.55

211.09

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

American Express

## Mailing Address

PO Box 360001

City State Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2875266.16

Activity or Event Identifier:  
AVD07Date 

M	M
0	5

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109649

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

422.33

422.34

844.67

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

632.87

632.89

1265.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 28 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2875358.55

Date

M M

/

D D

/

Y Y

Y Y

0 5

1 0

2 0

0 7

Transaction ID: H4-109650

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

46.19

46.20

92.39

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2875406.25

Date

M M

/

D D

/

Y Y

Y Y

0 5

1 0

2 0

0 7

Transaction ID: H4-109651

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

23.85

23.85

47.70

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

American Express

Mailing Address

Suite 0001

City

State

Zip Code

Chicago

IL

60679-0001

Purpose of Disbursement:

Parking Fees

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2875476.25

Date

M M

/

D D

/

Y Y

Y Y

0 5

1 0

2 0

0 7

Transaction ID: H4-109652

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

35.00

35.00

70.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

105.04

105.05

210.09

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 29 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
American Express

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Copying/Faxing
Category/  
Type
 Activity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2875606.04

Date 05 / 10 / 2007

Transaction ID: H4-109655

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

64.89

64.90

129.79

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

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Office Supplies Expenses
Category/  
Type
 Activity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2875697.73

Date 05 / 10 / 2007

Transaction ID: H4-109656

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

45.84

45.85

91.69

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

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Travel/Accommodation /Meals
Category/  
Type
 Activity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2877643.42

Date 05 / 10 / 2007

Transaction ID: H4-109657

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

972.84

972.85

1945.69

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1083.57

1083.60

2167.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 30 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
American Express

Mailing Address

P.O. Box 1270

City

State

Zip Code

Newark

NJ

07101-1270

Purpose of Disbursement:  
Internet ServicesCategory/  
TypeActivity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2877658.37

Date 05 / 10 / 2007

Transaction ID: H4-109663

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.47

7.48

14.95

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

Mailing Address

P.O. Box 1270

City

State

Zip Code

Newark

NJ

07101-1270

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2879861.61

Date 05 / 10 / 2007

Transaction ID: H4-109664

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1101.62

1101.62

2203.24

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

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:  
Exhibit FramesCategory/  
TypeActivity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2880927.45

Date 05 / 10 / 2007

Transaction ID: H4-109665

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

532.92

532.92

1065.84

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1642.01

1642.02

3284.03

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 31 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

PO Box 360001

City	State	Zip Code
Ft Lauderdale	FL	33336-0001

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
AVD07

See Attached Memo Entry

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2880988.98

Date 05 / 10 / 2007

Transaction ID: H4-109668

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.76		30.77		61.53

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

American Express

Mailing Address

PO Box 360001

City	State	Zip Code
Ft Lauderdale	FL	33336-0001

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
AVD07

See Attached Memo Entry

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2880996.97

Date 05 / 10 / 2007

Transaction ID: H4-109673

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.99		4.00		7.99

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

American Express

Mailing Address

PO Box 360001

City	State	Zip Code
Ft Lauderdale	FL	33336-0001

Purpose of Disbursement:  
Travel/Acom/Meals Int/OfficeCategory/  
TypeActivity or Event Identifier:  
AVD07

See Attached Memo Entry

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2882478.44

Date 05 / 10 / 2007

Transaction ID: H4-109674

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
740.73		740.74		1481.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
775.48		775.51		1550.99

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Computer Supplies/Hardware

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2882627.44

Date 05 / 10 / 2007

Transaction ID: H4-109675

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

74.50

74.50

149.00

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2882634.79

Date 05 / 10 / 2007

Transaction ID: H4-109676

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.67

3.68

7.35

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

AVF Consulting Inc.

Mailing Address

1220 Joppa Road

Building C, Suite 514

City

State

Zip Code

Baltimore

MD

21286

Purpose of Disbursement:

Computer Services

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2888076.26

Date 05 / 10 / 2007

Transaction ID: H4-109679

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2720.73

2720.74

5441.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2798.90

2798.92

5597.82

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 33 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Cambridge Transportation

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2888092.26

## Mailing Address

36392 Treasury Center

City

State

Zip Code

Chicago

IL

60694-6300

## Purpose of Disbursement:

Insurance General

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 10 / 2007

Transaction ID: H4-109684

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.00

8.00

16.00

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

Heather Colburn

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2889592.26

## Mailing Address

1320 Rutledge St.

City

State

Zip Code

Madison

WI

53703

## Purpose of Disbursement:

Consulting Training

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 10 / 2007

Transaction ID: H4-109685

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

750.00

750.00

1500.00

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

Crossroad Media InnovationsLLC

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2891268.76

## Mailing Address

1510 Park Road NW #3

City

State

Zip Code

Washington

DC

20010

## Purpose of Disbursement:

Computer Services

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 10 / 2007

Transaction ID: H4-109688

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

838.25

838.25

1676.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1596.25

1596.25

3192.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 34 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 DC Government Office of Tax and Revenue

Mailing Address

P.O. Box 96384

City State Zip Code  
 Washington DC 20090

Purpose of Disbursement:  
 Taxes - Sales & Use

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2891280.07

Date  M  M /  D  D /  Y  Y  Y  Y  
 05 / 10 / 2007

Transaction ID: H4-109689

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.65		5.66		11.31

**B. Full Name (Last, First, Middle Initial)**  
 Diverse Office Solutions

Mailing Address

9228 Gaither Road

City State Zip Code  
 Gaithersburg MD 20877

Purpose of Disbursement:  
 Furniture & Computer Equipment

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2892971.01

Date  M  M /  D  D /  Y  Y  Y  Y  
 05 / 10 / 2007

Transaction ID: H4-109690

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
845.47		845.47		1690.94

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

Mailing Address

1601 N Kent Street Suite 1200

City State Zip Code  
 Arlington VA 22209

Purpose of Disbursement:  
 Consulting Administration

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2902971.01

Date  M  M /  D  D /  Y  Y  Y  Y  
 05 / 10 / 2007

Transaction ID: H4-109691

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5000.00		5000.00		10000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5851.12		5851.13		11702.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 35 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

4212 River Rd NW

 City State Zip Code  
Washington DC 20016

 Purpose of Disbursement:  
Consulting Fundraising
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2903412.01

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

Transaction ID: H4-109695

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.50		220.50		441.00

**B. Full Name (Last, First, Middle Initial)**  
Ikon Office Solutions

Mailing Address

P.O. Box 827468

 City State Zip Code  
Philadelphia PA 19182-7468

 Purpose of Disbursement:  
Equipment Rental
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2905627.71

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

Transaction ID: H4-109696

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1107.85		1107.85		2215.70

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

Mailing Address

PO Box 95409

 City State Zip Code  
Palatine IL 60095

 Purpose of Disbursement:  
Office Supplies Expenses
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2905712.31

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

Transaction ID: H4-109697

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.30		42.30		84.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1370.65		1370.65		2741.30

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 36 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Rochelle Sachs Levin

Mailing Address

22800 SW 157th Avenue

City	State	Zip Code
Miami	FL	33170

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79321.77

Date 05 / 10 / 2007

Transaction ID: H4-109701

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

129.89

129.90

259.79

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

Mailing Address

EMILY's List-TX 2720 Pittsburg Street

City	State	Zip Code
Houston	TX	77005

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:  
 PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79364.30

Date 05 / 10 / 2007

Transaction ID: H4-109703

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.26

21.27

42.53

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

Mailing Address

EMILY's List-TX 2720 Pittsburg Street

City	State	Zip Code
Houston	TX	77005

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79584.55

Date 05 / 10 / 2007

Transaction ID: H4-109704

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

110.12

110.13

220.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

261.27

261.30

522.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Sherry Merfish

## Mailing Address

EMILY's List-TX 2720 Pittsburg Street

City	State	Zip Code
Houston	TX	77005

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79691.55

Date 05 / 10 / 2007

Transaction ID: H4-109705

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

53.50

53.50

107.00

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

Ellen L Moran

## Mailing Address

8220 Custer Rd

City	State	Zip Code
Bethesda	MD	20817

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79820.89

Date 05 / 10 / 2007

Transaction ID: H4-109706

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

64.67

64.67

129.34

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

PTI Communications

## Mailing Address

1334-E Shepard Drive

City	State	Zip Code
Sterling	VA	20164-4426

Purpose of Disbursement:  
Repairs MaintenanceCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2905762.31

Date 05 / 10 / 2007

Transaction ID: H4-109732

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.00

25.00

50.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

143.17

143.17

286.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Edna Romero

Mailing Address

7111 Halleck Street

City	State	Zip Code
District Heights	MD	20747

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2905862.31

Date 05 / 10 / 2007

Transaction ID: H4-109736

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

50.00

50.00

100.00

**B. Full Name (Last, First, Middle Initial)**  
 Janine E Salalac

Mailing Address

18031 Mark Lane

City	State	Zip Code
Yorba Linda	CA	92886

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2906036.87

Date 05 / 10 / 2007

Transaction ID: H4-109740

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

87.28

87.28

174.56

**C. Full Name (Last, First, Middle Initial)**  
 Janine E Salalac

Mailing Address

18031 Mark Lane

City	State	Zip Code
Yorba Linda	CA	92886

Purpose of Disbursement:  
 Postage

Category/  
Type

Activity or Event Identifier:  
 AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2906131.28

Date 05 / 10 / 2007

Transaction ID: H4-109741

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

47.20

47.21

94.41

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

184.48

184.49

368.97

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 39 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Sheads & Associates, Ltd.

Mailing Address

Prince William Square 303 Post Office Rd. Bldg A

City State Zip Code

Waldorf MD 20602

Purpose of Disbursement:  
Contribution ProcessingCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2909732.35

Date 05 / 10 / 2007

Transaction ID: H4-109743

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1800.53		1800.54		3601.07

**B. Full Name (Last, First, Middle Initial)**  
Thomas House Coffee Service

Mailing Address

2309 Kansas Ave.

City State Zip Code

Silver Spring MD 20910

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2909885.00

Date 05 / 10 / 2007

Transaction ID: H4-109744

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
76.32		76.33		152.65

**C. Full Name (Last, First, Middle Initial)**  
United Parcel Service

Mailing Address

P. O. Box 7247-0244

City State Zip Code

Philadelphia PA 19170-0001

Purpose of Disbursement:  
DeliveriesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2909963.12

Date 05 / 10 / 2007

Transaction ID: H4-109746

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.06		39.06		78.12

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1915.91		1915.93		3831.84

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
United Parcel Service

Mailing Address

P. O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:  
Deliveries

Category/  
Type

Activity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79912.83

Date 

M	M
0	5

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109747

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

45.97

45.97

91.94

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

Mailing Address

600 5th St., NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement:  
Local Transportation

Category/  
Type

Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2910963.12

Date 

M	M
0	5

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109751

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

500.00

500.00

1000.00

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

Mailing Address

600 5th St., NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement:  
Local Transportation

Category/  
Type

Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2911728.12

Date 

M	M
0	5

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109752

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

382.50

382.50

765.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

928.47

928.47

1856.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Working Assets

Mailing Address

P.O. Box 2041

City	State	Zip Code
Mechanicsburg	PA	17055

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2911779.20

Date 05 / 10 / 2007

Transaction ID: H4-109753

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.54

25.54

51.08

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

Mailing Address

P.O. Box 2853

City	State	Zip Code
New York	NY	10116-2853

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79959.63

Date 05 / 14 / 2007

Transaction ID: H4-109766

See Attached Memo Entry

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.40

23.40

46.80

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

Mailing Address

P.O. Box 2853

City	State	Zip Code
New York	NY	10116-2853

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80092.07

Date 05 / 14 / 2007

Transaction ID: H4-109767

See Attached Memo Entry

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

66.22

66.22

132.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

115.16

115.16

230.32

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

P.O. Box 2853

City

State

Zip Code

New York

NY

10116-2853

Purpose of Disbursement:

Office Supplies Expenses

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80296.97

Date 05 / 14 / 2007

Transaction ID: H4-109768

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

102.45

102.45

204.90

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

American Express

Mailing Address

P.O. Box 2853

City

State

Zip Code

New York

NY

10116-2853

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80817.97

Date 05 / 14 / 2007

Transaction ID: H4-109769

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

260.50

260.50

521.00

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Deliveries

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80826.21

Date 05 / 14 / 2007

Transaction ID: H4-109772

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.12

4.12

8.24

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

367.07

367.07

734.14

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80885.53

Date 05 / 14 / 2007

Transaction ID: H4-109773

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

29.66

29.66

59.32

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80952.99

Date 05 / 14 / 2007

Transaction ID: H4-109774

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

33.73

33.73

67.46

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80998.99

Date 05 / 14 / 2007

Transaction ID: H4-109776

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

23.00

23.00

46.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

86.39

86.39

172.78

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
American Express

Mailing Address

P.O. Box 1270

 City State Zip Code  
Newark NJ 07101-1270

 Purpose of Disbursement:  
Internet Services
Category/  
Type
 Activity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2911801.10

 Date MM / DD / YYYY  
05 / 14 / 2007

Transaction ID: H4-109778

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.95

10.95

21.90

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

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Postage
Category/  
Type
 Activity or Event Identifier:  
PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

81076.99

 Date MM / DD / YYYY  
05 / 14 / 2007

Transaction ID: H4-109779

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

39.00

39.00

78.00

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

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Postage
Category/  
Type
 Activity or Event Identifier:  
PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

81193.99

 Date MM / DD / YYYY  
05 / 14 / 2007

Transaction ID: H4-109784

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

58.50

58.50

117.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

108.45

108.45

216.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 45 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Office Supplies Expenses

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

82371.70

Date 05 / 14 / 2007

Transaction ID: H4-109785

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

588.85

588.86

1177.71

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

82802.93

Date 05 / 14 / 2007

Transaction ID: H4-109786

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

215.61

215.62

431.23

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

American Express

Mailing Address

P.O. Box 360001

City

State

Zip Code

Ft. Lauderdale

FL

33336-0001

Purpose of Disbursement:

Postage

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

82844.42

Date 05 / 14 / 2007

Transaction ID: H4-109789

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20.74

20.75

41.49

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

825.20

825.23

1650.43

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 46 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

P.O. Box 360001

City

State

Zip Code

Ft. Lauderdale

FL

33336-0001

Purpose of Disbursement:

Internet Services

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

82860.20

Date

M M

/

D D

/

Y Y

Y Y

0 5

1 4

2 0

0 7

Transaction ID: H4-109790

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.89

7.89

15.78

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

American Express

Mailing Address

P.O. Box 360001

City

State

Zip Code

Ft. Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

83041.22

Date

M M

/

D D

/

Y Y

Y Y

0 5

1 4

2 0

0 7

Transaction ID: H4-109791

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

90.51

90.51

181.02

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

American Express

Mailing Address

P.O. Box 360001

City

State

Zip Code

Ft. Lauderdale

FL

33336-0001

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

83503.64

Date

M M

/

D D

/

Y Y

Y Y

0 5

1 4

2 0

0 7

Transaction ID: H4-109792

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

231.21

231.21

462.42

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

329.61

329.61

659.22

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 47 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2911836.10

Date 05 / 14 / 2007

Transaction ID: H4-109798

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

17.50

17.50

35.00

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2911844.98

Date 05 / 14 / 2007

Transaction ID: H4-109801

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4.44

4.44

8.88

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

83592.25

Date 05 / 14 / 2007

Transaction ID: H4-109802

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

44.30

44.31

88.61

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

66.24

66.25

132.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 48 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Furniture &amp; Computer Equipment

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2918110.68

Date 05 / 14 / 2007

Transaction ID: H4-109804

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3132.85

3132.85

6265.70

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2918159.09

Date 05 / 14 / 2007

Transaction ID: H4-109805

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

24.20

24.21

48.41

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

American Express

Mailing Address

PO Box 360001

City

State

Zip Code

Ft Lauderdale

FL

33336-0001

Purpose of Disbursement:

Computer Services

Category/  
Type

Activity or Event Identifier:

PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

84924.70

Date 05 / 14 / 2007

Transaction ID: H4-109806

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

666.22

666.23

1332.45

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3823.27

3823.29

7646.56

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))**

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 49 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
American Express

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Internet Services
Category/  
Type
 Activity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2918201.08

 Date M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: H4-109807

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20.99

21.00

41.99

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

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Local Transportation
Category/  
Type
 Activity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2918701.08

 Date M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: H4-109808

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

250.00

250.00

500.00

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

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Telephone
Category/  
Type
 Activity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2923504.53

 Date M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: H4-109809

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2401.72

2401.73

4803.45

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2672.71

2672.73

5345.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 50 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
American Express

Mailing Address

PO Box 360001

 City State Zip Code  
Ft Lauderdale FL 33336-0001

 Purpose of Disbursement:  
Travel/Accommodation /Meals
Category/  
Type
 Activity or Event Identifier:  
PSP07

See Attached Memo Entry

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

86915.84

Date 05 / 14 / 2007

Transaction ID: H4-109810

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

995.57

995.57

1991.14

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

Mailing Address

1770 Columbia Rd. NW

 City State Zip Code  
Washington DC 20009

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2924741.03

Date 05 / 15 / 2007

Transaction ID: H4-109819

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

618.25

618.25

1236.50

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

Mailing Address

3730 5th St. P.O. Box 1265

 City State Zip Code  
North Beach MD 20714

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2927553.58

Date 05 / 15 / 2007

Transaction ID: H4-109820

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1406.27

1406.28

2812.55

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3020.09

3020.10

6040.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 51 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Lesbia Cajchun

Mailing Address

2902 Kings Chapel Rd, #7

City	State	Zip Code
Falls Church	VA	22042

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2929223.69

Date 05 / 15 / 2007

Transaction ID: H4-109821

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
835.05		835.06		1670.11

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

Mailing Address

1765 Swann St, NW #1

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2930539.77

Date 05 / 15 / 2007

Transaction ID: H4-109822

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
658.04		658.04		1316.08

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

Mailing Address

10621 Regent Park Court

City	State	Zip Code
Fairfax	VA	22030

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2932675.03

Date 05 / 15 / 2007

Transaction ID: H4-109823

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1067.63		1067.63		2135.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2560.72		2560.73		5121.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 52 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Ray Keating

Mailing Address  
816 Lucky Rd

City State Zip Code  
Severn MD 21144

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2934894.55

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

Transaction ID: H4-109824

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1109.76		1109.76		2219.52

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

Mailing Address  
6606 Allegheny Ave

City State Zip Code  
Takoma Park MD 20912

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2938342.28

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

Transaction ID: H4-109825

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1723.86		1723.87		3447.73

**C. Full Name (Last, First, Middle Initial)**  
Ellen R Malcolm

Mailing Address  
5060 Linnean Avenue, NW

City State Zip Code  
Washington, DC 20008

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2942175.27

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

Transaction ID: H4-109826

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1916.49		1916.50		3832.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4750.11		4750.13		9500.24

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 53 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Ellen L Moran

Mailing Address  
8220 Custer Rd

City State Zip Code  
Bethesda MD 20817

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2946881.96

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109827

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2353.34

2353.35

4706.69

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

Mailing Address  
4326 South 36th Street

City State Zip Code  
Arlington VA 22206

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2949538.24

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109828

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1328.14

1328.14

2656.28

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

Mailing Address  
3306 Wyndham Circle #327

City State Zip Code  
Alexandria VA 22302

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2951103.21

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109829

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

782.48

782.49

1564.97

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4463.96

4463.98

8927.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Jessica Aune

Mailing Address

117 Bromley Park Lane

City	State	Zip Code
Franklin	TN	37069

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2951195.56

Date 05 / 15 / 2007

Transaction ID: H4-109830

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

46.17

46.18

92.35

**B. Full Name (Last, First, Middle Initial)**  
 Ha-Hoa Dang

Mailing Address

2741 Woodley Place

City	State	Zip Code
Falls Church	VA	22046

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2952412.74

Date 05 / 15 / 2007

Transaction ID: H4-109831

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

608.59

608.59

1217.18

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

Mailing Address

104 Roberts Lane #401

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2954038.53

Date 05 / 15 / 2007

Transaction ID: H4-109832

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

812.89

812.90

1625.79

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1467.65

1467.67

2935.32

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 55 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Cheryl Gregory

Mailing Address

4551 Sawgrass Ct.

City	State	Zip Code
Alexandria	VA	22312

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2958302.60

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109833

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2132.03

2132.04

4264.07

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

Sara Little

Mailing Address

1500 Massachusetts Ave., Apt 727

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2959180.27

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109834

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

438.83

438.84

877.67

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

Lindsey O'Connell

Mailing Address

Georgetown U Village A D202

City	State	Zip Code
Washington	DC	20057

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2959272.62

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109835

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

46.17

46.18

92.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2617.03

2617.06

5234.09

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 56 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Amy Padre

Mailing Address

3429 Yuma Street NW Apt 104

City State Zip Code

Washington DC 20008

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2960719.97

Date 05 / 15 / 2007

Transaction ID: H4-109836

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
723.67		723.68		1447.35

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

Mailing Address

2450 Ontario Rd, NW

City State Zip Code

Washington DC 20009

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2962105.33

Date 05 / 15 / 2007

Transaction ID: H4-109837

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
692.68		692.68		1385.36

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

Mailing Address

1276 N. Wayne Street Apt 300

City State Zip Code

Arlington VA 22201

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2963217.61

Date 05 / 15 / 2007

Transaction ID: H4-109838

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
556.14		556.14		1112.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1972.49		1972.50		3944.99

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Jennifer Sanford

Mailing Address

802 H Gallop Hill Rd.

City	State	Zip Code
Gaithersburg	MD	20879

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2964100.09

Date 05 / 15 / 2007

Transaction ID: H4-109839

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
441.24		441.24		882.48

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

Mailing Address

4400 Mass Ave NW Anderson Hall T-03

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2964238.61

Date 05 / 15 / 2007

Transaction ID: H4-109840

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.26		69.26		138.52

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

Mailing Address

3806 Viser Court

City	State	Zip Code
Bowie	MD	20715

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2965636.60

Date 05 / 15 / 2007

Transaction ID: H4-109841

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
698.99		699.00		1397.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1209.49		1209.50		2418.99

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 58 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Andrea E Gottfried

Mailing Address

414 Wynnerwood Road

City State Zip Code

Pelham Manor NY 10803

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2967281.77

Date 05 / 15 / 2007

Transaction ID: H4-109843

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
822.58		822.59		1645.17

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

Mailing Address

3114 E. Baltimore

City State Zip Code

Baltimore MD 21224

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2969662.19

Date 05 / 15 / 2007

Transaction ID: H4-109844

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1190.21		1190.21		2380.42

**C. Full Name (Last, First, Middle Initial)**  
Rochelle Sachs Levin

Mailing Address

22800 SW 157th Avenue

City State Zip Code

Miami FL 33170

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2973632.86

Date 05 / 15 / 2007

Transaction ID: H4-109845

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1985.33		1985.34		3970.67

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3998.12		3998.14		7996.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Anna Lidman

Mailing Address

37 Brookview Terrace

City	State	Zip Code
Portland	ME	04102

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2976040.77

Date 05 / 15 / 2007

Transaction ID: H4-109846

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1203.95		1203.96		2407.91

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

Judy Loeb Goldfein

Mailing Address

50 East 89th Street 6E

City	State	Zip Code
New York	NY	10128

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2979485.36

Date 05 / 15 / 2007

Transaction ID: H4-109847

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1722.29		1722.30		3444.59

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

Colleen Medlock

Mailing Address

14637 Locustwood Lane

City	State	Zip Code
Silver Spring	MD	20905

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2980501.06

Date 05 / 15 / 2007

Transaction ID: H4-109848

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
507.85		507.85		1015.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3434.09		3434.11		6868.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 60 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Sherry Merfish

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2984007.27

## Mailing Address

EMILY's List-TX 2720 Pittsburg Street

City State Zip Code

Houston TX 77005

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109849

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1753.10

1753.11

3506.21

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

Rebecca Hughes Runyan

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2985164.18

## Mailing Address

1503 30th Street NW Apt 1

City State Zip Code

Washington DC 20007

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109850

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

578.45

578.46

1156.91

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

Janine Salalac

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2986085.22

## Mailing Address

4875 Mattos Drive

City State Zip Code

Freemont CA 94536

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109851

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

460.52

460.52

921.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2792.07

2792.09

5584.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 61 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Patricia Seitz

Mailing Address

617 14th Street, N.E

City

State

Zip Code

Washington

DC

20002

Purpose of Disbursement:

Salaries

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2987004.35

Activity or Event Identifier:

AVD07

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	7

Transaction ID: H4-109852

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

459.56

459.57

919.13

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

Emily Thomas

Mailing Address

3850 Tunlaw Rd Apt 503

City

State

Zip Code

Washington

DC

20007

Purpose of Disbursement:

Salaries

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2987093.70

Activity or Event Identifier:

AVD07

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	7

Transaction ID: H4-109853

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

44.67

44.68

89.35

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

Kaiya Waddell

Mailing Address

7960 Money Rd

City

State

Zip Code

Napa

CA

94558

Purpose of Disbursement:

Salaries

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2987975.71

Activity or Event Identifier:

AVD07

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	7

Transaction ID: H4-109854

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

441.00

441.01

882.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

945.23

945.26

1890.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Jennifer Williams

Mailing Address

1520 12th Street B

City State Zip Code  
 Washington DC 20005

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2989607.25

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

Transaction ID: H4-109855

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

815.77

815.77

1631.54

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

Mailing Address

3 Wyndham Drive

City State Zip Code  
 Portola Valley CA 94028

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2993519.16

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

Transaction ID: H4-109856

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1955.95

1955.96

3911.91

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

Mailing Address

2400 16th St NW Apt 607

City State Zip Code  
 Washington DC 20009

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2993730.07

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

Transaction ID: H4-109857

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.45

105.46

210.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2877.17

2877.19

5754.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 63 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Jeanne Duncan

Mailing Address

1633 NE Going Street

City	State	Zip Code
Portland	OR	97211

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2996551.90

Date 05 / 15 / 2007

Transaction ID: H4-109858

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1410.91		1410.92		2821.83

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

Mailing Address

511 Marina Avenue

City	State	Zip Code
Coronado	CA	92118

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2997494.02

Date 05 / 15 / 2007

Transaction ID: H4-109859

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
471.06		471.06		942.12

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

Mailing Address

10012 Dallas Avenue

City	State	Zip Code
Silver Spring	MD	20901

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3000494.05

Date 05 / 15 / 2007

Transaction ID: H4-109860

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1500.01		1500.02		3000.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3381.98		3382.00		6763.98

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 64 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Jackie Spirer

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3000586.40

## Mailing Address

3606 T Street NW

City State Zip Code

Washington DC 20007

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109861

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

46.17

46.18

92.35

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

Channing Ansley

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3001886.76

## Mailing Address

437 N Street SW

City State Zip Code

Washington DC 20024

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109862

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

650.18

650.18

1300.36

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

Tanya Bjork

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3004321.01

## Mailing Address

203 South Paterson Street Suite 400

City State Zip Code

Madison WI 53703

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109863

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1217.12

1217.13

2434.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1913.47

1913.49

3826.96

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 65 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Matthew Burgess

Mailing Address

3221 Connecticut Ave NW #506

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3006664.83

Date 05 / 15 / 2007

Transaction ID: H4-109864

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1171.91		1171.91		2343.82

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

Mailing Address

1435 N St. NW

City	State	Zip Code
Washington	DC	20007

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3008211.83

Date 05 / 15 / 2007

Transaction ID: H4-109865

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
773.50		773.50		1547.00

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

Mailing Address

121 South Hamilton Street Apt M

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3009888.16

Date 05 / 15 / 2007

Transaction ID: H4-109866

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
838.16		838.17		1676.33

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2783.57		2783.58		5567.15

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 66 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Kelsey Coday

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3010882.48

Mailing Address

208B Q St. NW

City State Zip Code

Washington

DC

20001

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109867

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

497.16

497.16

994.32

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

Kathleen Coyne-McCoy

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3013630.13

Mailing Address

267 Gleaner Chapel Road

City State Zip Code

North Scituate

RI

02857

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109868

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1373.82

1373.83

2747.65

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

Juanett Davis

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3013676.30

Mailing Address

2120 4th Ave. Apt #6

City State Zip Code

Los Angeles

CA

90018

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Date 05 / 15 / 2007

Transaction ID: H4-109869

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

23.08

23.09

46.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1894.06

1894.08

3788.14

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 67 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Kellie Dupree

Mailing Address

1644 Florida Ave. N.W.

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3014921.51

Date 05 / 15 / 2007

Transaction ID: H4-109870

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
622.60		622.61		1245.21

**B. Full Name (Last, First, Middle Initial)**  
Peggy Egan Marcy Gallup

Mailing Address

P.O. Box 6

City	State	Zip Code
East Glacier Park	MT	59434

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3017458.12

Date 05 / 15 / 2007

Transaction ID: H4-109871

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1268.30		1268.31		2536.61

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

Mailing Address

9172 Robin Court

City	State	Zip Code
Brentwood	MO	63144

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3019967.59

Date 05 / 15 / 2007

Transaction ID: H4-109872

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1254.73		1254.74		2509.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3145.63		3145.66		6291.29

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 68 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

624 East Broadway

City	State	Zip Code
Boston	MA	02127

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3022791.65

Date 05 / 15 / 2007

Transaction ID: H4-109873

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1412.03		1412.03		2824.06

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

Mailing Address

420 Oklahoma Avenue, NE #102

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3025663.06

Date 05 / 15 / 2007

Transaction ID: H4-109874

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1435.70		1435.71		2871.41

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

Mailing Address

5515 Little Falls Rd.

City	State	Zip Code
Arlington	VA	22207

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3029378.59

Date 05 / 15 / 2007

Transaction ID: H4-109875

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1857.76		1857.77		3715.53

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4705.49		4705.51		9411.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 69 / 963

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Ava Jones

## Mailing Address

1759 Poplar Lane NW

City State Zip Code

Washington

DC

20012

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3029603.46

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109876

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

112.43

112.44

224.87

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

Dana Jones

## Mailing Address

21766 Cypress Valley Terrace

City State Zip Code

Sterling

VA

20166

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3032155.76

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109877

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1276.15

1276.15

2552.30

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

Kari Lundstad-Vogt

## Mailing Address

739 3rd Street, SW

City State Zip Code

Washington

DC

20024

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3032863.35

Date 

M	M
0	5

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109878

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

353.79

353.80

707.59

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1742.37

1742.39

3484.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

1402 Emerson Street, NW

City	State	Zip Code
Washington	DC	20011

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3035532.56

Date 05 / 15 / 2007

Transaction ID: H4-109879

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1334.60		1334.61		2669.21

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

Mailing Address

4403 Woodgate Way

City	State	Zip Code
Bowie	MD	20720

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3035664.32

Date 05 / 15 / 2007

Transaction ID: H4-109880

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.88		65.88		131.76

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

Mailing Address

4857 Battery Lane Apt 506

City	State	Zip Code
Bethesda	MD	20814

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3037437.30

Date 05 / 15 / 2007

Transaction ID: H4-109881

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
886.49		886.49		1772.98

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2286.97		2286.98		4573.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Martha McKenna

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3040038.47

## Mailing Address

913 South Decker Avenue

City State Zip Code

Baltimore MD 21224

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	7

Transaction ID: H4-109882

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1300.58

1300.59

2601.17

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

Anne Meyer

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3040174.99

## Mailing Address

950 24th Street NW #704

City State Zip Code

Washington DC 20052

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	7

Transaction ID: H4-109883

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

68.26

68.26

136.52

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

Jonathan B. Parker

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3043484.92

## Mailing Address

2707 Adams Mill Rd. NW #404

City State Zip Code

Washington DC 20009

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	7

Transaction ID: H4-109884

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1654.96

1654.97

3309.93

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3023.80

3023.82

6047.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Alexandra Platkin

Mailing Address

4240 39th St NW Apt B

City State Zip Code  
Washington DC 20016

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3043665.62

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

Transaction ID: H4-109885

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

90.35

90.35

180.70

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

Mailing Address

2350 H Street NW #407

City State Zip Code  
Washington DC 20052

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3043781.06

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

Transaction ID: H4-109886

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

57.72

57.72

115.44

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

Mailing Address

165 Shepard Road

City State Zip Code  
Braintree MA 02184

Purpose of Disbursement:  
Salaries
Category/  
Type
Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3044827.77

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

Transaction ID: H4-109887

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

523.35

523.36

1046.71

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

671.42

671.43

1342.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Michelle Stephenson

Mailing Address

9638 Twin Lakes Avenue

City	State	Zip Code
Marion	MI	49665

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3045777.92

Date 05 / 15 / 2007

Transaction ID: H4-109888

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
475.07		475.08		950.15

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

Mailing Address

4212 26th Street, Unit A

City	State	Zip Code
San Francisco	CA	94131

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3048315.58

Date 05 / 15 / 2007

Transaction ID: H4-109889

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1268.83		1268.83		2537.66

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

Mailing Address

541 E. Nelson Avenue

City	State	Zip Code
Alexandria	VA	22301

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3050578.22

Date 05 / 15 / 2007

Transaction ID: H4-109890

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1131.32		1131.32		2262.64

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2875.22		2875.23		5750.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Stacia Young

Mailing Address

4400 Mass Ave NW Hughes Hall 206

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3050670.57

Date 05 / 15 / 2007

Transaction ID: H4-109891

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

46.17

46.18

92.35

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

Mailing Address

1168 Greenwich St #2

City	State	Zip Code
San Francisco	CA	94109

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3052797.98

Date 05 / 15 / 2007

Transaction ID: H4-109892

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1063.70

1063.71

2127.41

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

Mailing Address

616 E Street N.W. Apt 712

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3053963.73

Date 05 / 15 / 2007

Transaction ID: H4-109893

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

582.87

582.88

1165.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1692.74

1692.77

3385.51

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Edna Romero

Mailing Address

7111 Halleck Street

City State Zip Code

District Heights

MD

20747

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3055453.26

Date 05 / 15 / 2007

Transaction ID: H4-109894

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

744.76

744.77

1489.53

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

Quiyana Washington

Mailing Address

6974 Hanover Parkway Unit 300

City State Zip Code

Greenbelt

MD

20770

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3056988.42

Date 05 / 15 / 2007

Transaction ID: H4-109895

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

767.58

767.58

1535.16

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

Yvonne Williams

Mailing Address

5412 Bradford Ct. #231

City State Zip Code

Alexandria

VA

22311

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3058353.29

Date 05 / 15 / 2007

Transaction ID: H4-109896

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

682.43

682.44

1364.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2194.77

2194.79

4389.56

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Paychex

Mailing Address

3060 Williams Drive #300

City State Zip Code

Fairfax VA 22031

Purpose of Disbursement:

Taxes - Payroll

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3116158.91

Date 05 / 15 / 2007

Transaction ID: H4-109897

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

28902.81

28902.81

57805.62

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

Paychex

Mailing Address

3060 Williams Drive #300

City State Zip Code

Fairfax VA 22031

Purpose of Disbursement:

Taxes - Payroll

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3116947.89

Date 05 / 15 / 2007

Transaction ID: H4-109898

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

394.49

394.49

788.98

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

Paychex

Mailing Address

3060 Williams Drive #300

City State Zip Code

Fairfax VA 22031

Purpose of Disbursement:

Taxes - Payroll

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3133562.46

Date 05 / 15 / 2007

Transaction ID: H4-109899

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8307.28

8307.29

16614.57

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37604.58

37604.59

75209.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

3060 Williams Drive #300

City State Zip Code

Fairfax VA 22031

Purpose of Disbursement:  
 Taxes - Payroll

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3133755.13

Date 05 / 15 / 2007

Transaction ID: H4-109900

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

96.33

96.34

192.67

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

John Hancock c/o City Bank Delaware

Mailing Address

1615 Brett Road Lock Box 7122

City State Zip Code

New Castle DE 19720

Purpose of Disbursement:  
 Employment Pension/ 401(k)

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3147822.12

Date 05 / 16 / 2007

Transaction ID: H4-109951

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7033.49

7033.50

14066.99

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

Arrowhead Mountain Spring Water Co.

Mailing Address

P.O. Box 52237

City State Zip Code

Phoenix AZ 85072-2237

Purpose of Disbursement:  
 Office Supplies Expenses

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3147848.33

Date 05 / 17 / 2007

Transaction ID: H4-109903

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.10

13.11

26.21

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7142.92

7142.95

14285.87

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 AT&T

Mailing Address

Payment Center

City	State	Zip Code
Sacramento	CA	95887-0001

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3148999.86

Date 

M	M
0	5

 / 

D	D
1	7

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109904

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

575.76

575.77

1151.53

**B. Full Name (Last, First, Middle Initial)**  
 AT&T

Mailing Address

Payment Center

City	State	Zip Code
Sacramento	CA	95887-0001

Purpose of Disbursement:  
 Internet Services

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3149588.06

Date 

M	M
0	5

 / 

D	D
1	7

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109905

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

294.10

294.10

588.20

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

Mailing Address

P.O.Box 57194

City	State	Zip Code
Philadelphia	PA	19111-7194

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3151187.90

Date 

M	M
0	5

 / 

D	D
1	7

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109906

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

799.92

799.92

1599.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1669.78

1669.79

3339.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 79 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

3730 5th St. P.O. Box 1265

City State Zip Code

North Beach MD 20714

Purpose of Disbursement:  
Internet ServicesCategory/  
TypeActivity or Event Identifier:  
AVD07

See Attached Memo Entry

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3151235.80

Date 05 / 17 / 2007

Transaction ID: H4-109907

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.95

23.95

47.90

**B. Full Name (Last, First, Middle Initial)**  
 Cogent Communications, Inc.

Mailing Address

P.O. Box 791087

City State Zip Code  
Baltimore MD 21279-1087Purpose of Disbursement:  
Internet ServicesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3151785.80

Date 05 / 17 / 2007

Transaction ID: H4-109908

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

275.00

275.00

550.00

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

Mailing Address

1200 South Fern Street

City State Zip Code  
Arlington VA 22202Purpose of Disbursement:  
Publication & DuesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3151885.80

Date 05 / 17 / 2007

Transaction ID: H4-109909

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

50.00

50.00

100.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

348.95

348.95

697.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Deer ParkSpring Water Processing Center

Mailing Address

P.O. Box 52271

 City State Zip Code  
Phoenix AR 85072-2271

 Purpose of Disbursement:  
Office Supplies Expenses
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3152120.22

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

Transaction ID: H4-109910

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
117.21		117.21		234.42

**B. Full Name (Last, First, Middle Initial)**  
Diverse Office Solutions

Mailing Address

9228 Gaither Road

 City State Zip Code  
Gaithersburg MD 20877

 Purpose of Disbursement:  
Office Supplies Expenses
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3152975.04

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

Transaction ID: H4-109911

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
427.41		427.41		854.82

**C. Full Name (Last, First, Middle Initial)**  
Flynn Radice Architectural Finishes, Inc.

Mailing Address

2219 Kansas Ave

 City State Zip Code  
Silver Spring MD 20910

 Purpose of Disbursement:  
Repairs Maintenance
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3154208.04

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

Transaction ID: H4-109913

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
616.50		616.50		1233.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1161.12		1161.12		2322.24

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 General Systems Corporation

Mailing Address

8306-D Old Courthouse Road

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:  
ProgrammingCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3154673.04

Date 05 / 17 / 2007

Transaction ID: H4-109914

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

232.50

232.50

465.00

**B. Full Name (Last, First, Middle Initial)**  
 General Systems Corporation

Mailing Address

8306-D Old Courthouse Road

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:  
Computer SupportCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3154865.04

Date 05 / 17 / 2007

Transaction ID: H4-109915

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

96.00

96.00

192.00

**C. Full Name (Last, First, Middle Initial)**  
 JIB Monitoring Center

Mailing Address

1120 Connecticut Avenue, NW Suite 1200

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3154881.96

Date 05 / 17 / 2007

Transaction ID: H4-109917

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.46

8.46

16.92

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

336.96

336.96

673.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Ray Keating

Mailing Address

816 Lucky Rd

City

State

Zip Code

Severn

MD

21144

Purpose of Disbursement:

Internet Services

Category/  
Type

Activity or Event Identifier:

AVD07

See Attached Memo Entry

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3154919.96

Date 05 / 17 / 2007

Transaction ID: H4-109919

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.00

19.00

38.00

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

Amie Kershner

Mailing Address

3114 E. Baltimore

City

State

Zip Code

Baltimore

MD

21224

Purpose of Disbursement:

Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

86937.84

Date 05 / 17 / 2007

Transaction ID: H4-109920

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

11.00

11.00

22.00

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

United Parcel Service

Mailing Address

P. O. Box 7247-0244

City

State

Zip Code

Philadelphia

PA

19170-0001

Purpose of Disbursement:

Deliveries

Category/  
Type

Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3154994.90

Date 05 / 17 / 2007

Transaction ID: H4-109934

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.47

37.47

74.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

67.47

67.47

134.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 United Parcel Service

Mailing Address

P. O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:  
DeliveriesCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87086.32

Date 05 / 17 / 2007

Transaction ID: H4-109935

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

74.24

74.24

148.48

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

Mailing Address

4212 26th Street, Unit A

City	State	Zip Code
San Francisco	CA	94131

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3155072.90

Date 05 / 17 / 2007

Transaction ID: H4-109937

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.00

39.00

78.00

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

Mailing Address

P.O. Box 1100

City	State	Zip Code
Albany	NY	12250-0001

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87166.68

Date 05 / 17 / 2007

Transaction ID: H4-109938

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

40.18

40.18

80.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

153.42

153.42

306.84

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Verizon Wireless

Mailing Address

PO Box 489

City	State	Zip Code
Newark	NJ	07101-0489

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3155188.15

Date 05 / 17 / 2007

Transaction ID: H4-109939

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.62		57.63		115.25

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

Mailing Address

3 Wyndham Drive

City	State	Zip Code
Portola Valley	CA	94028

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87259.33

Date 05 / 17 / 2007

Transaction ID: H4-109940

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.32		46.33		92.65

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

Mailing Address

3 Wyndham Drive

City	State	Zip Code
Portola Valley	CA	94028

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87374.34

Date 05 / 17 / 2007

Transaction ID: H4-109941

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.50		57.51		115.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.44		161.47		322.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Patricia Williams

## Mailing Address

3 Wyndham Drive

City	State	Zip Code
Portola Valley	CA	94028

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87418.16

Date 05 / 17 / 2007

Transaction ID: H4-109942

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.91		21.91		43.82

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

100 Spear Street Owners' Corp

## Mailing Address

PO Box 10297

City	State	Zip Code
Newark	NJ	07193-0297

Purpose of Disbursement:  
RentCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3161909.02

Date 05 / 23 / 2007

Transaction ID: H4-109958

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3360.43		3360.44		6720.87

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

ACE Beverage

## Mailing Address

3301 New Mexico Avenue, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement:  
Catering/FacilitiesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3162128.27

Date 05 / 23 / 2007

Transaction ID: H4-109959

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.62		109.63		219.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3491.96		3491.98		6983.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
ArchivesOne, Inc.

Mailing Address

PO Box 13005

City	State	Zip Code
Lewiston	ME	04243-9505

Purpose of Disbursement:  
RentCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3162508.88

Date 05 / 23 / 2007

Transaction ID: H4-109960

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
190.30		190.31		380.61

**B. Full Name (Last, First, Middle Initial)**  
Jack I. Bender & Sons

Mailing Address

1120 Connecticut Ave, NW Suite 1200

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
RentCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3231285.21

Date 05 / 23 / 2007

Transaction ID: H4-109961

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34388.16		34388.17		68776.33

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

Mailing Address

4800 Dexter Street, NW

City	State	Zip Code
Washington	DC	20007

Purpose of Disbursement:  
Strategic ConsultingCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3241285.21

Date 05 / 23 / 2007

Transaction ID: H4-109964

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5000.00		5000.00		10000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39578.46		39578.48		79156.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Colonial Parking, Inc.

Mailing Address

1050 Thomas Jefferson St., #100

City State Zip Code  
 Washington DC 20007

Purpose of Disbursement:  
 Parking Fees

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3242545.21

Date  M  M /  D  D /  Y  Y  Y  Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-109967

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

630.00

630.00

1260.00

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

Mailing Address

P. O. Box 371461

City State Zip Code  
 Pittsburg PA 15250-7461

Purpose of Disbursement:  
 Deliveries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3242590.13

Date  M  M /  D  D /  Y  Y  Y  Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-109970

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

22.46

22.46

44.92

**C. Full Name (Last, First, Middle Initial)**  
 Friends & Company Staffing

Mailing Address

6564 Loisdale Court Suite 1020

City State Zip Code  
 Springfield VA 22150

Purpose of Disbursement:  
 Temporary Help

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3242749.08

Date  M  M /  D  D /  Y  Y  Y  Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-109971

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

79.47

79.48

158.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

731.93

731.94

1463.87

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

General Systems Corporation

Mailing Address

8306-D Old Courthouse Road

City State Zip Code

Vienna VA 22182

Purpose of Disbursement:  
ProgrammingCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3242845.08

Date 05 / 23 / 2007

Transaction ID: H4-109972

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

48.00

48.00

96.00

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

General Systems Corporation

Mailing Address

8306-D Old Courthouse Road

City State Zip Code

Vienna VA 22182

Purpose of Disbursement:  
ProgrammingCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3243013.08

Date 05 / 23 / 2007

Transaction ID: H4-109973

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

84.00

84.00

168.00

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

Judy Loeb Goldfein

Mailing Address

50 East 89th Street 6E

City State Zip Code

New York NY 10128

Purpose of Disbursement:  
RentCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3244213.08

Date 05 / 23 / 2007

Transaction ID: H4-109974

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

600.00

600.00

1200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

732.00

732.00

1464.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Rochelle Sachs Levin

## Mailing Address

22800 SW 157th Avenue

City State Zip Code

Miami

FL

33170

## Purpose of Disbursement:

Rent

Category/  
Type

## Activity or Event Identifier:

AVD07

See Attached Memo Entry

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3245213.08

Date M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-109982

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

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

Gerald Merfish

## Mailing Address

P.O. Box 15879

City State Zip Code

Houston

TX

77220-5879

## Purpose of Disbursement:

Rent

Category/  
Type

## Activity or Event Identifier:

AVD07

See Attached Memo Entry

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3246213.08

Date M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-109983

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

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

Purchase Power

## Mailing Address

PO Box 856042

City State Zip Code

Louisville

KY

40285

## Purpose of Disbursement:

Postage

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3247213.08

Date M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-109988

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1500.00		1500.00		3000.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

Dept DC 85105 PO Box 30851

 City State Zip Code  
Hartford CT 06150-0851

 Purpose of Disbursement:  
Office Supplies Expenses
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3247555.21

 Date  M  M /  D  D /  Y  Y  Y  Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-109993

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
171.06		171.07		342.13

**B. Full Name (Last, First, Middle Initial)**  
UNUM Life Insurance Co. of America

Mailing Address

P. O. Box 406990

 City State Zip Code  
Atlanta GA 30384-6990

 Purpose of Disbursement:  
Insurance Health/Life
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3253924.06

 Date  M  M /  D  D /  Y  Y  Y  Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-110004

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3184.42		3184.43		6368.85

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

Mailing Address

PO Box 1

 City State Zip Code  
Worcester MA 01654

 Purpose of Disbursement:  
Telephone
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3254015.81

 Date  M  M /  D  D /  Y  Y  Y  Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: H4-110006

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.87		45.88		91.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3401.35		3401.38		6802.73

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 91 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Amy Zellerbach

## Mailing Address

1168 Greenwich St #2

City State Zip Code

San Francisco CA 94109

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
TypeActivity or Event Identifier:  
PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87519.31

Date 05 / 23 / 2007

Transaction ID: H4-110007

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

50.57

50.58

101.15

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

Production Solutions, Inc.

## Mailing Address

1953 Gallows Road Suite 600

City State Zip Code

Vienna VA 22182

Purpose of Disbursement:  
DeliveriesCategory/  
TypeActivity or Event Identifier:  
PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87528.59

Date 05 / 23 / 2007

Transaction ID: H4-110008

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.64

4.64

9.28

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

Production Solutions, Inc.

## Mailing Address

1953 Gallows Road Suite 600

City State Zip Code

Vienna VA 22182

Purpose of Disbursement:  
PrintingCategory/  
TypeActivity or Event Identifier:  
PSP07

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

89128.59

Date 05 / 23 / 2007

Transaction ID: H4-110009

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

376.32

1223.68

1600.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

431.53

1278.90

1710.43

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Lauren Caselli

Mailing Address

LXR Hall 410 Georgetown University

City	State	Zip Code
Washington	DC	20057

 Purpose of Disbursement:  
 Salaries
Category/  
Type
 Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3254085.07

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	4	/	2	0	0	7

Transaction ID: H4-110017

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

34.63

34.63

69.26

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

Mailing Address

2813 Covington Rd

City	State	Zip Code
Silver Spring	MD	20910

 Purpose of Disbursement:  
 Consulting Fundraising
Category/  
Type
 Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3266897.07

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	4	/	2	0	0	7

Transaction ID: H4-110018

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6406.00

6406.00

12812.00

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

Mailing Address

1308 Forest Glen Dr. South

City	State	Zip Code
Winnetka	IL	60093

 Purpose of Disbursement:  
 Consulting Fundraising
Category/  
Type
 Activity or Event Identifier:  
 PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

94128.59

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	7

Transaction ID: H4-110015

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2500.00

2500.00

5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8940.63

8940.63

17881.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 93 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Contract Cleaning Services Inc JIB Service Group

## Mailing Address

1120 Connecticut Ave, NW 1200

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
Building Utilities & FeesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3267214.32

Date 05 / 31 / 2007

Transaction ID: H4-110045

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

158.62

158.63

317.25

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

Dell Financial Services Payment Processing Center

## Mailing Address

PO Box 5292

City State Zip Code

Carol Stream IL 60197-5292

Purpose of Disbursement:  
Furniture & Computer EquipmentCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3268356.43

Date 05 / 31 / 2007

Transaction ID: H4-110048

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

571.05

571.06

1142.11

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

Federal Express

## Mailing Address

P. O. Box 371461

City State Zip Code

Pittsburg PA 15250-7461

Purpose of Disbursement:  
DeliveriesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3268379.15

Date 05 / 31 / 2007

Transaction ID: H4-110049

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

11.36

11.36

22.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

741.03

741.05

1482.08

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Friends & Company Staffing

Mailing Address

6564 Loisdale Court Suite 1020

City	State	Zip Code
Springfield	VA	22150

Purpose of Disbursement:  
 Temporary Help

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3268827.95

Date 

M	M
0	5

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-110050

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

224.40

224.40

448.80

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

Mailing Address

P. O. Box 95101

City	State	Zip Code
Chicago	IL	60694-5101

Purpose of Disbursement:  
 Insurance Health/Life

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3296831.03

Date 

M	M
0	5

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-110051

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14001.54

14001.54

28003.08

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

Mailing Address

P. O. Box 95101

City	State	Zip Code
Chicago	IL	60694-5101

Purpose of Disbursement:  
 Insurance Health/Life

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3305451.89

Date 

M	M
0	5

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-110052

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4310.43

4310.43

8620.86

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

18536.37

18536.37

37072.74

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

The Guardian

Mailing Address

P. O. Box 95101

City

State

Zip Code

Chicago

IL

60694-5101

Purpose of Disbursement:

Insurance Health/Life

Category/  
Type

Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3305521.27

Date 05 / 31 / 2007

Transaction ID: H4-110053

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

34.69

34.69

69.38

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

Ikon Office Solutions

Mailing Address

P.O. Box 827468

City

State

Zip Code

Philadelphia

PA

19182-7468

Purpose of Disbursement:

Equipment Maintenance

Category/  
Type

Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3305643.21

Date 05 / 31 / 2007

Transaction ID: H4-110055

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

60.97

60.97

121.94

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

JIB Monitoring Center

Mailing Address

1120 Connecticut Avenue, Suite 1200

City

State

Zip Code

Washington

DC

20036

Purpose of Disbursement:

Building Utilities &amp; Fees

Category/  
Type

Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3305879.48

Date 05 / 31 / 2007

Transaction ID: H4-110056

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

118.13

118.14

236.27

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

213.79

213.80

427.59

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 JIB Monitoring Center

Mailing Address

1120 Connecticut Avenue, NW Suite 1200

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
Building Utilities & FeesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3305929.48

Date 05 / 31 / 2007

Transaction ID: H4-110057

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.00

25.00

50.00

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

Mailing Address

1201 Third Avenue 40th Floor

City State Zip Code

Seattle WA 98101-3099

Purpose of Disbursement:  
Legal ServicesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3313715.48

Date 05 / 31 / 2007

Transaction ID: H4-110061

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3893.00

3893.00

7786.00

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

Mailing Address

1201 Third Avenue 40th Floor

City State Zip Code

Seattle WA 98101-3099

Purpose of Disbursement:  
Local TransportationCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3313748.68

Date 05 / 31 / 2007

Transaction ID: H4-110062

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

16.60

16.60

33.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3934.60

3934.60

7869.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Perkins Coie

Mailing Address

1201 Third Avenue 40th Floor

City	State	Zip Code
Seattle	WA	98101-3099

 Purpose of Disbursement:  
 Legal Services
Category/  
Type
 Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3314116.68

Date 05 / 31 / 2007

Transaction ID: H4-110063

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

184.00

184.00

368.00

**B. Full Name (Last, First, Middle Initial)**  
 Progressive Business Pub

Mailing Address

370 Technology Drive PO Box 3019

City	State	Zip Code
Malvern	PA	19355

 Purpose of Disbursement:  
 Publication & Dues
Category/  
Type
 Activity or Event Identifier:  
 PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

94377.59

Date 05 / 31 / 2007

Transaction ID: H4-110069

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

124.50

124.50

249.00

**C. Full Name (Last, First, Middle Initial)**  
 Sky Television Inc.

Mailing Address

9033 Dellwood Drive

City	State	Zip Code
Vienna	VA	22180

 Purpose of Disbursement:  
 Building Utilities & Fees
Category/  
Type
 Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3315997.68

Date 05 / 31 / 2007

Transaction ID: H4-110072

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

940.50

940.50

1881.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1249.00

1249.00

2498.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Thomas House Coffee Service

Mailing Address

2309 Kansas Ave.

City	State	Zip Code
Silver Spring	MD	20910

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3316167.75

Date 05 / 31 / 2007

Transaction ID: H4-110073

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.03		85.04		170.07

**B. Full Name (Last, First, Middle Initial)**  
United Parcel Service

Mailing Address

P. O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:  
DeliveriesCategory/  
TypeActivity or Event Identifier:  
PSP07

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

94472.80

Date 05 / 31 / 2007

Transaction ID: H4-110074

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.60		47.61		95.21

**C. Full Name (Last, First, Middle Initial)**  
United Parcel Service

Mailing Address

P. O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:  
DeliveriesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3316250.91

Date 05 / 31 / 2007

Transaction ID: H4-110075

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.58		41.58		83.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
174.21		174.23		348.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

United Parcel Service

Mailing Address

P. O. Box 7247-0244

City

Philadelphia

State

PA

Zip Code

19170-0001

Purpose of Disbursement:  
DeliveriesCategory/  
Type

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

94620.00

Activity or Event Identifier:  
PSP07

Date 05 / 31 / 2007

Transaction ID: H4-110076

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

73.60

73.60

147.20

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

Verizon Wireless

Mailing Address

PO Box 25506

City

Lehigh Valley

State

PA

Zip Code

18002-5506

Purpose of Disbursement:  
TelephoneCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3316301.18

Activity or Event Identifier:  
AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110078

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.13

25.14

50.27

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

Verizon Wireless

Mailing Address

PO Box 790406

City

St. Louis

State

MO

Zip Code

63179-0406

Purpose of Disbursement:  
TelephoneCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3316411.55

Activity or Event Identifier:  
AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110079

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

55.18

55.19

110.37

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

153.91

153.93

307.84

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Working Assets

Mailing Address

P.O. Box 2041

City State Zip Code

Mechanicsburg PA 17055

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3317172.50

Date 05 / 31 / 2007

Transaction ID: H4-110080

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
380.47		380.48		760.95

**B. Full Name (Last, First, Middle Initial)**  
Diverse Office Solutions

Mailing Address

9228 Gaither Road

City State Zip Code

Gaithersburg MD 20877

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3318667.45

Date 05 / 31 / 2007

Transaction ID: H4-110085

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
747.47		747.48		1494.95

**C. Full Name (Last, First, Middle Initial)**  
Diverse Office Solutions

Mailing Address

9228 Gaither Road

City State Zip Code

Gaithersburg MD 20877

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3319053.86

Date 05 / 31 / 2007

Transaction ID: H4-110086

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
193.20		193.21		386.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1321.14		1321.17		2642.31

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 101 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Diverse Office Solutions

Mailing Address

9228 Gaither Road

City	State	Zip Code
Gaithersburg	MD	20877

Purpose of Disbursement:  
 Office Supplies Expenses

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3318314.67

Date 05 / 31 / 2007

Transaction ID: H4-110088

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-369.59		-369.60		-739.19

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

Mailing Address

1770 Columbia Rd. NW

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3319551.17

Date 05 / 31 / 2007

Transaction ID: H4-110098

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
618.25		618.25		1236.50

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

Mailing Address

3730 5th St. P.O. Box 1265

City	State	Zip Code
North Beach	MD	20714

Purpose of Disbursement:  
 Salaries

Category/  
Type

Activity or Event Identifier:  
 AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3322363.72

Date 05 / 31 / 2007

Transaction ID: H4-110099

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1406.27		1406.28		2812.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1654.93		1654.93		3309.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 102 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Lesbia Cajchun

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

2902 Kings Chapel Rd, #7

City State Zip Code

Falls Church VA 22042

## Purpose of Disbursement:

Salaries

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3324033.83

## Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110100

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

835.05

835.06

1670.11

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

Kimberly Coleman

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

1765 Swann St, NW #1

City State Zip Code

Washington DC 20009

## Purpose of Disbursement:

Salaries

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3325349.91

## Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110101

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

658.04

658.04

1316.08

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

Caroline Fines

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

10621 Regent Park Court

City State Zip Code

Fairfax VA 22030

## Purpose of Disbursement:

Salaries

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3327485.17

## Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110102

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1067.63

1067.63

2135.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2560.72

2560.73

5121.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 103 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Ray Keating

Mailing Address

816 Lucky Rd

City State Zip Code

Severn MD 21144

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3329704.69

Date 05 / 31 / 2007

Transaction ID: H4-110103

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1109.76

1109.76

2219.52

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

Ellen R Malcolm

Mailing Address

5060 Linnean Avenue, NW

City State Zip Code

Washington, DC 20008

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3333537.68

Date 05 / 31 / 2007

Transaction ID: H4-110105

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1916.49

1916.50

3832.99

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

Ellen L Moran

Mailing Address

8220 Custer Rd

City State Zip Code

Bethesda MD 20817

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3338247.18

Date 05 / 31 / 2007

Transaction ID: H4-110106

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2354.75

2354.75

4709.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5381.00

5381.01

10762.01

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 104 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Tosha Washington

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

3306 Wyndham Circle #327

City State Zip Code

Alexandria VA 22302

Purpose of Disbursement:  
SalariesCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3339921.55

Activity or Event Identifier:  
AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110107

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
837.18		837.19		1674.37

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

Ha-Hoa Dang

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

2741 Woodley Place

City State Zip Code

Falls Church VA 22046

Purpose of Disbursement:  
SalariesCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3341138.73

Activity or Event Identifier:  
AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110108

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
608.59		608.59		1217.18

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

Amy Drummond

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

104 Roberts Lane #401

City State Zip Code

Alexandria VA 22314

Purpose of Disbursement:  
SalariesCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3343727.37

Activity or Event Identifier:  
AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110109

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1294.32		1294.32		2588.64

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2740.09		2740.10		5480.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 105 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Cheryl Gregory

Mailing Address

4551 Sawgrass Ct.

City State Zip Code

Alexandria VA 22312

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3347991.44

Date 05 / 31 / 2007

Transaction ID: H4-110110

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2132.03

2132.04

4264.07

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

Sara Little

Mailing Address

1500 Massachusetts Ave., Apt 727

City State Zip Code

Washington DC 20005

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3348869.11

Date 05 / 31 / 2007

Transaction ID: H4-110111

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

438.83

438.84

877.67

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

Karen McLoughin

Mailing Address

4212 River Rd, NW

City State Zip Code

Washington DC 20016

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3348982.09

Date 05 / 31 / 2007

Transaction ID: H4-110112

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

56.49

56.49

112.98

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2627.35

2627.37

5254.72

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 106 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Amy Padre

## Mailing Address

3429 Yuma Street NW Apt 104

City State Zip Code

Washington DC 20008

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3350429.44

Date 05 / 31 / 2007

Transaction ID: H4-110113

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

723.67

723.68

1447.35

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

Tiffany Reed

## Mailing Address

2450 Ontario Rd, NW

City State Zip Code

Washington DC 20009

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3351814.80

Date 05 / 31 / 2007

Transaction ID: H4-110114

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

692.68

692.68

1385.36

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

Lauren Reznick

## Mailing Address

1276 N. Wayne Street Apt 300

City State Zip Code

Arlington VA 22201

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3352927.08

Date 05 / 31 / 2007

Transaction ID: H4-110115

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

556.14

556.14

1112.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1972.49

1972.50

3944.99

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 107 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Jennifer Sanford

Mailing Address

802 H Gallop Hill Rd.

City	State	Zip Code
Gaithersburg	MD	20879

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3353809.56

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	7

Transaction ID: H4-110116

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
441.24		441.24		882.48

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

Mailing Address

605 Ashbury Circle Emory University

City	State	Zip Code
Atlanta	GA	30322

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3354295.14

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	7

Transaction ID: H4-110117

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
242.79		242.79		485.58

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

Mailing Address

3806 Viser Court

City	State	Zip Code
Bowie	MD	20715

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3355693.13

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	7

Transaction ID: H4-110118

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
698.99		699.00		1397.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1383.02		1383.03		2766.05

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 108 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Andrea E Gottfried

## Mailing Address

414 Wynnerwood Road

City State Zip Code

Pelham Manor NY 10803

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

## Allocated Activity or Event Year-To-Date

3357338.30

Date 05 / 31 / 2007

Transaction ID: H4-110119

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

822.58

822.59

1645.17

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

Amie Kershner

## Mailing Address

3114 E. Baltimore

City State Zip Code

Baltimore MD 21224

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

## Allocated Activity or Event Year-To-Date

3359718.72

Date 05 / 31 / 2007

Transaction ID: H4-110120

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1190.21

1190.21

2380.42

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

Rochelle Sachs Levin

## Mailing Address

22800 SW 157th Avenue

City State Zip Code

Miami FL 33170

## Purpose of Disbursement:

Salaries

Category/  
Type

## Activity or Event Identifier:

AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

## Allocated Activity or Event Year-To-Date

3363689.39

Date 05 / 31 / 2007

Transaction ID: H4-110121

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1985.33

1985.34

3970.67

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3998.12

3998.14

7996.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 109 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Anna Lidman

Mailing Address

37 Brookview Terrace

 City State Zip Code  
Portland ME 04102

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3366097.30

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110122

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1203.95		1203.96		2407.91

**B. Full Name (Last, First, Middle Initial)**  
Judy Loeb Goldfein

Mailing Address

50 East 89th Street 6E

 City State Zip Code  
New York NY 10128

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3369541.89

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110123

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1722.29		1722.30		3444.59

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

Mailing Address

14637 Locustwood Lane

 City State Zip Code  
Silver Spring MD 20905

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3370557.59

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110124

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
507.85		507.85		1015.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3434.09		3434.11		6868.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 110 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Sherry Merfish

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

EMILY's List-TX 2720 Pittsburg Street

City State Zip Code

Houston TX 77005

Purpose of Disbursement:  
SalariesCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3374063.80

Activity or Event Identifier:  
AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110125

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1753.10

1753.11

3506.21

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

Rebecca Hughes Runyan

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

1503 30th Street NW Apt 1

City State Zip Code

Washington DC 20007

Purpose of Disbursement:  
SalariesCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3375220.71

Activity or Event Identifier:  
AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110126

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

578.45

578.46

1156.91

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

Janine Salalac

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

4875 Mattos Drive

City State Zip Code

Freemont CA 94536

Purpose of Disbursement:  
SalariesCategory/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3376141.75

Activity or Event Identifier:  
AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110127

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

460.52

460.52

921.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2792.07

2792.09

5584.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 111 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

617 14th Street, N.E

City State Zip Code

Washington

DC

20002

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3377060.88

Date 05 / 31 / 2007

Transaction ID: H4-110128

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

459.56

459.57

919.13

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

Mailing Address

1005 S. Wright Street

City State Zip Code

Champaign

IL

61820

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3377288.75

Date 05 / 31 / 2007

Transaction ID: H4-110129

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

113.93

113.94

227.87

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

Mailing Address

7960 Money Rd

City State Zip Code

Napa

CA

94558

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3378195.04

Date 05 / 31 / 2007

Transaction ID: H4-110130

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

453.14

453.15

906.29

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1026.63

1026.66

2053.29

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 112 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Jennifer Williams

Mailing Address

1520 12th Street B

 City State Zip Code  
Washington DC 20005

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3379826.58

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110131

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

815.77

815.77

1631.54

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

Mailing Address

3 Wyndham Drive

 City State Zip Code  
Portola Valley CA 94028

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3383738.49

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110132

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1955.95

1955.96

3911.91

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

Mailing Address

2400 16th St NW Apt 607

 City State Zip Code  
Washington DC 20009

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3383949.40

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110133

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.45

105.46

210.91

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2877.17

2877.19

5754.36

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 113 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Nora Boedecker

Mailing Address

1030 Columbia Avenue Box 169

City State Zip Code

Claremont CA 91711

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3384151.40

Date 05 / 31 / 2007

Transaction ID: H4-110134

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

101.00

101.00

202.00

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

Mailing Address

1633 NE Going Street

City State Zip Code

Portland OR 97211

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3386973.23

Date 05 / 31 / 2007

Transaction ID: H4-110135

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1410.91

1410.92

2821.83

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

Mailing Address

511 Marina Avenue

City State Zip Code

Coronado CA 92118

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3387865.82

Date 05 / 31 / 2007

Transaction ID: H4-110136

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

446.29

446.30

892.59

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1958.20

1958.22

3916.42

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 114 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Ramona Oliver

 Mailing Address  
10012 Dallas Avenue

 City State Zip Code  
Silver Spring MD 20901

 Purpose of Disbursement:  
Salaries

 Category/  
Type

 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3390865.85

 Date  M  M /  D  D /  Y  Y  Y  Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110137

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 1500.01		<input type="text"/> 1500.02		<input type="text"/> 3000.03

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

 Mailing Address  
437 N Street SW

 City State Zip Code  
Washington DC 20024

 Purpose of Disbursement:  
Salaries

 Category/  
Type

 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3392166.21

 Date  M  M /  D  D /  Y  Y  Y  Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110138

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 650.18		<input type="text"/> 650.18		<input type="text"/> 1300.36

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

 Mailing Address  
203 South Paterson Street Suite 400

 City State Zip Code  
Madison WI 53703

 Purpose of Disbursement:  
Salaries

 Category/  
Type

 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3394600.46

 Date  M  M /  D  D /  Y  Y  Y  Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110139

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 1217.12		<input type="text"/> 1217.13		<input type="text"/> 2434.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 3367.31		<input type="text"/> 3367.33		<input type="text"/> 6734.64

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 115 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Matthew Burgess

Mailing Address

3221 Connecticut Ave NW #506

 City State Zip Code  
Washington DC 20008

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3396944.28

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110140

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1171.91		1171.91		2343.82

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

Mailing Address

1435 N St. NW

 City State Zip Code  
Washington DC 20007

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3398491.28

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110141

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
773.50		773.50		1547.00

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

Mailing Address

121 South Hamilton Street Apt M

 City State Zip Code  
Madison WI 53703

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3400167.61

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110142

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
838.16		838.17		1676.33

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2783.57		2783.58		5567.15

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 116 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Kelsey Coday

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3401161.93

Mailing Address

208B Q St. NW

City State Zip Code

Washington DC 20001

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110143

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

497.16

497.16

994.32

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

Kathleen Coyne-McCoy

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3403909.58

Mailing Address

267 Gleaner Chapel Road

City State Zip Code

North Scituate RI 02857

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110144

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1373.82

1373.83

2747.65

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

Juanett Davis

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3403955.75

Mailing Address

2120 4th Ave. Apt #6

City State Zip Code

Los Angeles CA 90018

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110145

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

23.08

23.09

46.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1894.06

1894.08

3788.14

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 117 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Kellie Dupree

Mailing Address

1644 Florida Ave. N.W.

City State Zip Code

Washington

DC

20009

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3405200.96

Date 05 / 31 / 2007

Transaction ID: H4-110146

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

622.60

622.61

1245.21

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

Peggy Egan Marcy Gallup

Mailing Address

P.O. Box 6

City State Zip Code

East Glacier Park

MT

59434

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3407737.57

Date 05 / 31 / 2007

Transaction ID: H4-110147

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1268.30

1268.31

2536.61

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

Emily Elbert

Mailing Address

9172 Robin Court

City State Zip Code

Brentwood

MO

63144

Purpose of Disbursement:

Salaries

Category/  
Type

Activity or Event Identifier:

AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3410247.04

Date 05 / 31 / 2007

Transaction ID: H4-110148

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1254.73

1254.74

2509.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3145.63

3145.66

6291.29

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 118 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

624 East Broadway

 City State Zip Code  
Boston MA 02127

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3413071.10

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110149

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1412.03		1412.03		2824.06

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

Mailing Address

420 Oklahoma Avenue, NE #102

 City State Zip Code  
Washington DC 20002

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3415504.26

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110150

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1216.58		1216.58		2433.16

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

Mailing Address

5515 Little Falls Rd.

 City State Zip Code  
Arlington VA 22207

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3419219.79

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110151

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1857.76		1857.77		3715.53

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4486.37		4486.38		8972.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 119 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Dana Jones

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

21766 Cypress Valley Terrace

City State Zip Code

Sterling VA 20166

## Purpose of Disbursement:

Salaries

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3421772.09

## Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110152

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1276.15		1276.15		2552.30

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

Kari Lundstad-Vogt

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

739 3rd Street, SW

City State Zip Code

Washington DC 20024

## Purpose of Disbursement:

Salaries

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3422977.30

## Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110153

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
602.60		602.61		1205.21

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

Susan Markham

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

1402 Emerson Street, NW

City State Zip Code

Washington DC 20011

## Purpose of Disbursement:

Salaries

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3425646.51

## Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110154

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1334.60		1334.61		2669.21

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3213.35		3213.37		6426.72

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 120 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
David McGonagle

Mailing Address

4857 Battery Lane Apt 506

 City State Zip Code  
Bethesda MD 20814

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3427419.49

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110155

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
886.49		886.49		1772.98

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

Mailing Address

913 South Decker Avenue

 City State Zip Code  
Baltimore MD 21224

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3433599.48

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110156

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3089.99		3090.00		6179.99

**C. Full Name (Last, First, Middle Initial)**  
Jonathan B. Parker

Mailing Address

2707 Adams Mill Rd. NW #404

 City State Zip Code  
Washington DC 20009

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3436909.41

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110157

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1654.96		1654.97		3309.93

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5631.44		5631.46		11262.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 121 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Alexandra Platkin

Mailing Address

4240 39th St NW Apt B

 City State Zip Code  
Washington DC 20016

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3437090.11

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110158

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.35		90.35		180.70

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

Mailing Address

165 Shepard Road

 City State Zip Code  
Braintree MA 02184

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3438136.82

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110159

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
523.35		523.36		1046.71

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

Mailing Address

9638 Twin Lakes Avenue

 City State Zip Code  
Marion MI 49665

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3439086.97

 Date M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: H4-110160

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
475.07		475.08		950.15

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1088.77		1088.79		2177.56

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 122 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Cristina Uribe

## Mailing Address

4212 26th Street, Unit A

City	State	Zip Code
San Francisco	CA	94131

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3441624.63

Date 05 / 31 / 2007

Transaction ID: H4-110161

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1268.83		1268.83		2537.66

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

Mary Jane Volk

## Mailing Address

541 E. Nelson Avenue

City	State	Zip Code
Alexandria	VA	22301

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3443887.27

Date 05 / 31 / 2007

Transaction ID: H4-110162

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1131.32		1131.32		2262.64

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

Amy Zellerbach

## Mailing Address

1168 Greenwich St #2

City	State	Zip Code
San Francisco	CA	94109

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3446014.68

Date 05 / 31 / 2007

Transaction ID: H4-110163

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1063.70		1063.71		2127.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3463.85		3463.86		6927.71

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 123 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Lalla Mohib

## Mailing Address

616 E Street N.W. Apt 712

City State Zip Code

Washington DC 20004

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3447180.43

Date 05 / 31 / 2007

Transaction ID: H4-110164

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

582.87

582.88

1165.75

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

Edna Romero

## Mailing Address

7111 Halleck Street

City State Zip Code

District Heights MD 20747

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3448669.96

Date 05 / 31 / 2007

Transaction ID: H4-110165

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

744.76

744.77

1489.53

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

Quiyana Washington

## Mailing Address

6974 Hanover Parkway Unit 300

City State Zip Code

Greenbelt MD 20770

Purpose of Disbursement:  
SalariesCategory/  
TypeActivity or Event Identifier:  
AVD07

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3450205.12

Date 05 / 31 / 2007

Transaction ID: H4-110166

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

767.58

767.58

1535.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2095.21

2095.23

4190.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 124 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Yvonne Williams

Mailing Address

5412 Bradford Ct. #231

 City State Zip Code  
Alexandria VA 22311

 Purpose of Disbursement:  
Salaries
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3451569.99

 Date  M  M /  D  D /  Y  Y  Y  Y  
05 / 31 / 2007

Transaction ID: H4-110167

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
682.43		682.44		1364.87

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

Mailing Address

3060 Williams Drive #300

 City State Zip Code  
Fairfax VA 22031

 Purpose of Disbursement:  
Taxes - Payroll
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3527337.93

 Date  M  M /  D  D /  Y  Y  Y  Y  
05 / 31 / 2007

Transaction ID: H4-110168

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37883.97		37883.97		75767.94

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

Mailing Address

3060 Williams Drive #300

 City State Zip Code  
Fairfax VA 22031

 Purpose of Disbursement:  
Taxes - Payroll
Category/  
Type
 Activity or Event Identifier:  
AVD07

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3528317.25

 Date  M  M /  D  D /  Y  Y  Y  Y  
05 / 31 / 2007

Transaction ID: H4-110169

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
489.66		489.66		979.32

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39056.06		39056.07		78112.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 125 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Britt Cocanour

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

6606 Allegheny Ave

City State Zip Code

Takoma Park MD 20912

## Purpose of Disbursement:

Salaries

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3531752.32

## Activity or Event Identifier:

AVD07

Date 05 / 31 / 2007

Transaction ID: H4-110170

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1717.53		1717.54		3435.07

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

US Post Office

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

1800 Coral Way

City State Zip Code

Miami FL 33245

## Purpose of Disbursement:

Postage

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

## Activity or Event Identifier:

Date 05 / 03 / 2007

Transaction ID: H4-109586-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.15		1.16		2.31

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

Bell South

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

## Mailing Address

PO Box 70807

City State Zip Code

Charlotte NC 28272-0807

## Purpose of Disbursement:

Telephone

Category/  
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

## Activity or Event Identifier:

Date 05 / 03 / 2007

Transaction ID: H4-109587-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.76		113.76		227.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1717.53		1717.54		3435.07

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 126 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 CHS at the Blue Note

Mailing Address

2491 Winchester Rd

City	State	Zip Code
Memphis	TN	38116

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109649-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.37		10.38		20.75

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

Mailing Address

1734 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109649-30000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.97		3.98		7.95

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

Mailing Address

1615 Rhode Island Ave NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109649-40000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
405.25		405.25		810.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 127 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Au Bon Pain

Mailing Address

1732 L Street NW

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109649-50000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.74		2.73		5.47

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

Mailing Address

1200 19th Street NW

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109650-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.19		46.20		92.39

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

Mailing Address

1120 19th Street

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109651-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.85		23.85		47.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 128 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Parking Management Inc

## Mailing Address

1100 Connecticut Ave, NW

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
Parking FeesCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109652-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

35.00

35.00

70.00

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

Kinkos

## Mailing Address

1612 K St Nw

City State Zip Code

Washington DC 20006

Purpose of Disbursement:  
Copying/FaxingCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109655-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

64.89

64.90

129.79

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

Office Depot

## Mailing Address

676 South Whitney Way

City State Zip Code

Madison WI 53711

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109656-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

45.84

45.85

91.69

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 129 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Northwest Airlines

Mailing Address

7500 Airline Drive

City	State	Zip Code
Minneapolis	MN	55450

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.80		114.80		229.60

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

Mailing Address

7500 Airline Drive

City	State	Zip Code
Minneapolis	MN	55450

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-20000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

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

Mailing Address

7500 Airline Drive

City	State	Zip Code
Minneapolis	MN	55450

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-30000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 130 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Courtyard by Marriot

Mailing Address

1900 Connecticut Ave NW

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-40000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
599.41		599.42		1198.83

**B. Full Name (Last, First, Middle Initial)**  
 MSN Airport Parking

Mailing Address

4000 International Ln # 3

City	State	Zip Code
Madison	WI	53704

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-50000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		18.00		36.00

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

Mailing Address

200 S Wacker Drive

City	State	Zip Code
Chicago	IL	60606

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-60000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.58		35.59		71.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 131 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

7205 County Highway

City State Zip Code

Madison WI 53704

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-70000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.10		19.10		38.20

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

Mailing Address

7205 County Highway

City State Zip Code

Madison WI 53704

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-80000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.06		16.05		32.11

**C. Full Name (Last, First, Middle Initial)**  
Devil's Head Resort

Mailing Address

S6330 Bluff Rd

City State Zip Code

Merrimac WI 53561

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-90000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.04		84.04		168.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 132 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Omni Shoreham Hotel

## Mailing Address

2500 Calvert Street NW

City State Zip Code

Washington DC 20008

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-100000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.50

7.50

15.00

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

Open Patry

## Mailing Address

2675 Sun Valley Dr

City State Zip Code

Delafield WI 53018

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-110000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.48

1.49

2.97

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

Open Patry

## Mailing Address

2675 Sun Valley Dr

City State Zip Code

Delafield WI 53018

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-120000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.91

17.91

35.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 133 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

1301 Connecticut Ave NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-130000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

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

Mailing Address

2026 P St NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-140000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.00		25.00		50.00

**C. Full Name (Last, First, Middle Initial)**  
 Au Bon Pain

Mailing Address

1732 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109657-150000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.46		6.45		12.91

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 134 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

AOL

Mailing Address

8619 Westwood Center

City State Zip Code

Vienna VA 22182

Purpose of Disbursement:  
Internet ServicesCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109663-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.47

7.48

14.95

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

Southwest Airlines

Mailing Address

2702 Love Field Drive

City State Zip Code

Dallas TX 75235

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

120.40

120.40

240.80

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

US Airways

Mailing Address

4000 E. Sky Harbor Blvd

City State Zip Code

Phoenix AZ 85034

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-20000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

170.30

170.30

340.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 135 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

13810 SE Eastgate Way

City	State	Zip Code
Bellevue	WA	98005

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-30000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
291.76		291.77		583.53

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

Mailing Address

13810 SE Eastgate Way

City	State	Zip Code
Bellevue	WA	98005

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-35000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
247.35		247.35		494.70

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

Mailing Address

1605 Main St

City	State	Zip Code
Bolton	CT	06226

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-45000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.53		23.53		47.06

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 136 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Legal Sea Foods

Mailing Address

2301 Jefferson Davis Hwy

City State Zip Code

Arlington VA 22202

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-55000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.74

3.75

7.49

**B. Full Name (Last, First, Middle Initial)**  
 Raku An Asian diner

Mailing Address

1900 Q St NW

City State Zip Code

Washington DC 20009

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-65000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.43

12.42

24.85

**C. Full Name (Last, First, Middle Initial)**  
 Omni Shoreham Hotel

Mailing Address

2500 Calvert Street NW

City State Zip Code

Washington DC 20008

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-75000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.93

1.92

3.85

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 137 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Thai Tanic

Mailing Address  
 1326 14th St NW

City State Zip Code  
 Washington DC 20005

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-85000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.24		22.24		44.48

**B. Full Name (Last, First, Middle Initial)**  
 Au Bon Pain

Mailing Address  
 1732 L Street NW

City State Zip Code  
 Washington DC 20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-95000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.96		1.97		3.93

**C. Full Name (Last, First, Middle Initial)**  
 Pappa Joe's

Mailing Address  
 428 Hume Ave

City State Zip Code  
 Alexandria VA 22301

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-105000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.27		12.27		24.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 138 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Beacon Hotel

## Mailing Address

1615 RHODE ISLAND AVENUE, NW

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-110000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

79.98

79.97

159.95

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

Sizzling Express

## Mailing Address

538 23rd St NW

City State Zip Code

Washington DC 20037

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-115000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.33

4.33

8.66

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

US Airways

## Mailing Address

4000 E. Sky Harbor Blvd

City State Zip Code

Phoenix AZ 85034

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109664-125000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

109.40

109.40

218.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 139 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Foliograph Gallery

Mailing Address

919 18th St NW

City

State

Zip Code

Washington

DC

20006

Purpose of Disbursement:

Exhibit Frames

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109665-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

532.92

532.92

1065.84

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

Verizon Wireless

Mailing Address

PO Box 17464

City

State

Zip Code

Baltimore

MD

21297-1464

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109668-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

30.76

30.77

61.53

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

AT&amp;T

Mailing Address

Payment Center

City

State

Zip Code

Sacramento

CA

95887-0001

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109673-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.99

4.00

7.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 140 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

2627 N Hollywood Way

City State Zip Code

Burbank CA 91505

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.83		36.84		73.67

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

Mailing Address

555 Universal Hollywood Drive

City State Zip Code

Universal City CA 91608

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-20000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.00		15.00		30.00

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

Mailing Address

555 Universal Hollywood Drive

City State Zip Code

Universal City CA 91608

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-30000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
192.66		192.66		385.32

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 141 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Five Star Parking

## Mailing Address

1 Airport Dr # 15,

City State Zip Code

Oakland CA 94621

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-40000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.00

33.00

66.00

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

Chevron

## Mailing Address

104 La Mesa Dr

City State Zip Code

Portola Valley CA 94028

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-50000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.00

13.01

26.01

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

Rincon Center

## Mailing Address

101 Spear Street

City State Zip Code

San Francisco CA 94105

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-60000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.75

14.75

29.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 142 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

1734 L Street NW

City	State	Zip Code
------	-------	----------

Washington	DC	20036
------------	----	-------

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
 Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00		
-----	--	--

Date 

M	M
0	5

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109674-70000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT			
<table border="1"><tr><td>2.69</td></tr></table>	2.69		<table border="1"><tr><td>2.70</td></tr></table>	2.70		<table border="1"><tr><td>5.39</td></tr></table>	5.39
2.69							
2.70							
5.39							

**B. Full Name (Last, First, Middle Initial)**  
 Murphy's

Mailing Address

2609 24th Street NW

City	State	Zip Code
------	-------	----------

Washington	DC	20008
------------	----	-------

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
 Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00		
-----	--	--

Date 

M	M
0	5

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109674-80000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT			
<table border="1"><tr><td>12.26</td></tr></table>	12.26		<table border="1"><tr><td>12.27</td></tr></table>	12.27		<table border="1"><tr><td>24.53</td></tr></table>	24.53
12.26							
12.27							
24.53							

**C. Full Name (Last, First, Middle Initial)**  
 Omni Shoreham Hotel

Mailing Address

2500 Calvert Street NW

City	State	Zip Code
------	-------	----------

Washington	DC	20008
------------	----	-------

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
 Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00		
-----	--	--

Date 

M	M
0	5

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4-109674-90000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT			
<table border="1"><tr><td>5.85</td></tr></table>	5.85		<table border="1"><tr><td>5.85</td></tr></table>	5.85		<table border="1"><tr><td>11.70</td></tr></table>	11.70
5.85							
5.85							
11.70							

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT			
<table border="1"><tr><td>0.00</td></tr></table>	0.00		<table border="1"><tr><td>0.00</td></tr></table>	0.00		<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00							
0.00							
0.00							

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT			
<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>	

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 143 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Omni Shoreham Hotel

## Mailing Address

2500 Calvert Street NW

City State Zip Code

Washington DC 20008

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date M M / D D / Y Y Y Y

0 5 / 1 0 / 2 0 0 7

Transaction ID: H4-109674-100000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.65

8.65

17.30

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

Omni Shoreham Hotel

## Mailing Address

2500 Calvert Street NW

City State Zip Code

Washington DC 20008

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date M M / D D / Y Y Y Y

0 5 / 1 0 / 2 0 0 7

Transaction ID: H4-109674-110000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.95

4.95

9.90

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

Omni Shoreham Hotel

## Mailing Address

2500 Calvert Street NW

City State Zip Code

Washington DC 20008

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date M M / D D / Y Y Y Y

0 5 / 1 0 / 2 0 0 7

Transaction ID: H4-109674-120000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.22

5.22

10.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 144 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Cingular Wireless

Mailing Address

PO Box 17356

City	State	Zip Code
Baltimore	MD	21297-1356

Purpose of Disbursement:  
 Internet Services

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-130000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
106.72		106.73		213.45

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

Mailing Address

1734 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-140000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.80		3.79		7.59

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

Mailing Address

1734 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-150000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.68		1.68		3.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 145 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Dulles Airport

Mailing Address

45020 Aviation Drive

City State Zip Code

Sterling

VA

20166

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-160000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.08

6.07

12.15

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

Beacon Hotel

Mailing Address

1615 RHODE ISLAND AVENUE, NW

City State Zip Code

Washington

DC

20036

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-170000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

97.90

97.89

195.79

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

Five Star Parking

Mailing Address

1 Airport Dr # 15

City State Zip Code

Oakland

CA

94621

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-180000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

83.00

83.00

166.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 146 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Rincon Center

Mailing Address

101 Spear Street

City	State	Zip Code
Oakland	CA	94105

Purpose of Disbursement:  
 Office Supplies Expenses

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-190000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.75		14.75		29.50

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

Mailing Address

345 Spear St

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-200000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.34		24.33		48.67

**C. Full Name (Last, First, Middle Initial)**  
 Main and Mission Parking

Mailing Address

123 Mission St

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-210000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.00		8.00		16.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 147 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

San Diego Convention Center

## Mailing Address

111 W Harbor Dr

City State Zip Code

San Diego CA 92107

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-220000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.25

3.25

6.50

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

San Diego Convention Center

## Mailing Address

111 W Harbor Dr

City State Zip Code

San Diego CA 92101

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-230000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.25

3.25

6.50

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

Avis

## Mailing Address

3180 N. Harbor Dr

City State Zip Code

San Diego CA 92101

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-240000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

28.10

28.10

56.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 148 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 The Tin Fish

Mailing Address  
 910 Seacoast Dr

City State Zip Code  
 San Diego CA 91932

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109674-250000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.00		15.00		30.00

**B. Full Name (Last, First, Middle Initial)**  
 Element 5 Info

Mailing Address  
 9625 West 76th Street Suite 150

City State Zip Code  
 Eden Prairie MN 55340

Purpose of Disbursement:  
 Computer Supplies/Hardware

Category/Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109675-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.50		74.50		149.00

**C. Full Name (Last, First, Middle Initial)**  
 Omni Shoreham Hotel

Mailing Address  
 2500 Calvert Street NW

City State Zip Code  
 Washington DC 20008

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109676-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.67		3.68		7.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 149 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Bell South

Mailing Address

PO Box 70807

City

State

Zip Code

Charlotte

NC

28272-0807

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109701-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

129.89

129.90

259.79

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

Time Warner

Mailing Address

One Time Warner Center

City

State

Zip Code

New York

NY

10019

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109704-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

27.17

27.17

54.34

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

MCI

Mailing Address

P. O. Box 85053

City

State

Zip Code

Louisville

KY

40285

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109704-20000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

25.00

25.00

50.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 150 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
AT&T

Mailing Address  
Payment Center

City State Zip Code  
Sacramento CA 95887-0001

Purpose of Disbursement:  
Telephone

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109704-30000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.95		37.96		75.91

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

Mailing Address  
PO Box 17464

City State Zip Code  
Baltimore MD 21297-1464

Purpose of Disbursement:  
Telephone

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109704-40000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.00		20.00		40.00

**C. Full Name (Last, First, Middle Initial)**  
US Post Office

Mailing Address  
1400 Pine St

City State Zip Code  
San Francisco CA 94109

Purpose of Disbursement:  
Postage

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 10 / 2007

Transaction ID: H4-109741-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.21		47.20		94.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 151 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Food Emporium

## Mailing Address

10 Union Sq. 14th &amp; Park

City State Zip Code

New York NY 10003

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109766-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

23.40

23.40

46.80

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

Roth's Steakhouse

## Mailing Address

680 Columbus Ave

City State Zip Code

New York NY 10025

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109767-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

66.22

66.22

132.44

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

Staples

## Mailing Address

86th and Lexington St.

City State Zip Code

New York NY 10017

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109768-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

102.45

102.45

204.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 152 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Omni Shoreham Hotel

Mailing Address

2500 Calvert Street NW

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109769-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
245.82		245.82		491.64

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

Mailing Address

1131 Madison Ave

City	State	Zip Code
New York	NY	10028

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109769-20000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.68		14.68		29.36

**C. Full Name (Last, First, Middle Initial)**  
 The UPS Store

Mailing Address

11 Main St

City	State	Zip Code
Westbrook	ME	04092

Purpose of Disbursement:  
 Deliveries

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109772-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.12		4.12		8.24

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 153 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
New York Palace

Mailing Address

455 Madison Avenue

City State Zip Code

New York NY 10022

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109773-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.05		16.05		32.10

**B. Full Name (Last, First, Middle Initial)**  
New York Sports Grill

Mailing Address

56 Greenwich Ave

City State Zip Code

New York NY 10011

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109773-20000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.07		5.06		10.13

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

Mailing Address

580 Madison Ave

City State Zip Code

New York NY 10022

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109773-30000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.54		8.55		17.09

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 154 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

HMS Portland Airport

Mailing Address

Portland Intl Airport

City State Zip Code

Portland OR 97218

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109774-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.05

1.04

2.09

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

HMS Portland Airport

Mailing Address

Portland Intl Airport

City State Zip Code

Portland OR 97218

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109774-20000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.18

3.19

6.37

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

S&amp;R Medallion Corp

Mailing Address

625 West 51st Street

City State Zip Code

New York NY 10019

Purpose of Disbursement:  
Travel/Accommodation /MealsCategory/  
Type

Activity or Event Identifier:

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109774-30000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

29.50

29.50

59.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 155 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Michael Londo Inc

Mailing Address

301 Windsor Dr

City State Zip Code

Bartlett IL 60103

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109776-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

23.00

23.00

46.00

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

Mailing Address

8619 Westwood Center

City State Zip Code

Vienna VA 22182

Purpose of Disbursement:  
 Internet Services

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109778-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.95

10.95

21.90

**C. Full Name (Last, First, Middle Initial)**  
 U. S. Postal Service

Mailing Address

1501 Connecticut Ave NW

City State Zip Code

Washington DC 20036

Purpose of Disbursement:  
 Postage

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109779-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.00

39.00

78.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 156 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 US Postmaster

Mailing Address

1400 L Street NW

City State Zip Code

Washington DC 20005

Purpose of Disbursement:  
PostageCategory/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109784-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

58.50

58.50

117.00

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

Mailing Address

1025 Wayne Ave

City State Zip Code

Chambersburg PA 17201

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109785-10000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

203.36

203.35

406.71

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

Mailing Address

11 Castle Dr

City State Zip Code

Woodbury NY 11797

Purpose of Disbursement:  
Office Supplies ExpensesCategory/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109785-20000

**[MEMO ITEM]**

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.58

72.59

145.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 157 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

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

Mailing Address

1025 Wayne Ave

 City State Zip Code  
Chambersburg PA 17201

 Purpose of Disbursement:  
Office Supplies Expenses
Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109785-30000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.74		59.74		119.48

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

Mailing Address

1300 Connecticut Avenue NW

 City State Zip Code  
Washington DC 20001

 Purpose of Disbursement:  
Office Supplies Expenses
Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109785-40000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
253.17		253.18		506.35

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

Mailing Address

8140 Walnut Hill Lane

 City State Zip Code  
Dallas TX 75231

 Purpose of Disbursement:  
Travel/Accommodation /Meals
Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109786-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
215.61		215.62		431.23

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 158 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
US Postmaster

Mailing Address  
1800 Coral Way

City State Zip Code  
Miami FL 33245

Purpose of Disbursement:  
Postage

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109789-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.74		20.75		41.49

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

Mailing Address  
PO Box 91123

City State Zip Code  
Seattle WA 98111

Purpose of Disbursement:  
Internet Services

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109790-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.89		7.89		15.78

**C. Full Name (Last, First, Middle Initial)**  
Green St. Cafe

Mailing Address  
3110 Commodore Plz

City State Zip Code  
Coconut Grove FL 33133

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109791-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.89		30.89		61.78

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 159 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Roasters and Toaster

Mailing Address

15440 SW 82nd Ave

City	State	Zip Code
Miami	FL	33157

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109791-20000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.37		15.36		30.73

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

Mailing Address

2641 Connecticut Ave. NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109791-30000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.87		33.88		67.75

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

Mailing Address

20405 S Dixie Hwy

City	State	Zip Code
Miami	FL	33189

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109791-40000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.38		10.38		20.76

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 160 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Cingular Wireless

Mailing Address

PO Box 17356

City State Zip Code  
 Baltimore MD 21297-1356

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: H4-109792-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
231.21		231.21		462.42

**B. Full Name (Last, First, Middle Initial)**  
 VIP Cab Company

Mailing Address

85 South Bragg Street

City State Zip Code  
 Alexandria VA 22312

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: H4-109798-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.50		17.50		35.00

**C. Full Name (Last, First, Middle Initial)**  
 Au Bon Pain

Mailing Address

1732 L Street NW

City State Zip Code  
 Washington DC 20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: H4-109801-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.44		4.44		8.88

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 161 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Andale Mexican Restaurant

Mailing Address

2150 Chestnut St

City	State	Zip Code
San Francisco	CA	94123

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109802-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.72		12.72		25.44

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

Mailing Address

132 The Embarcadero

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement:  
Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109802-20000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.58		31.59		63.17

**C. Full Name (Last, First, Middle Initial)**  
Dell Direct Sales, L.P.

Mailing Address

P.O. Box 890680

City	State	Zip Code
Dallas	TX	75389

Purpose of Disbursement:  
Furniture & Computer Equipment

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109804-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1339.33		1339.33		2678.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 162 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Sonicwall Inc.

Mailing Address

1143 Borregas Avenue

City	State	Zip Code
Sunnyvale	CA	94089

Purpose of Disbursement:  
 Furniture & Computer Equipment

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109804-20000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1793.52		1793.52		3587.04

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

Mailing Address

1823 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109805-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.20		24.21		48.41

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

Mailing Address

P. O. Box 7247-7090

City	State	Zip Code
Philadelphia	PA	19170

Purpose of Disbursement:  
 Computer Services

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109806-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
666.22		666.23		1332.45

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 163 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Cox Communications

Mailing Address

9 James P Murphy Ind Hwy

City	State	Zip Code
Warwick	RI	02893

Purpose of Disbursement:  
 Internet Services

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109807-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.99		21.00		41.99

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

Mailing Address

600 5th St., NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement:  
 Local Transportation

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109808-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
250.00		250.00		500.00

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

Mailing Address

PO Box 1

City	State	Zip Code
Worcester	MA	01654

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109809-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2401.72		2401.73		4803.45

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 164 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 United Airlines

Mailing Address

PO Box 66100

City State Zip Code  
 Chicago IL 60666

Purpose of Disbursement:  
 Travel/Accommodation /Meals

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 14 / 2007

Transaction ID: H4-109810-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
995.57		995.57		1991.14

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

Mailing Address

40 West Leeds Ave

City State Zip Code  
 Pleasantville NJ 08232

Purpose of Disbursement:  
 Internet Services

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 17 / 2007

Transaction ID: H4-109907-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.95		23.95		47.90

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

Mailing Address

West Leeds Ave

City State Zip Code  
 Pleasantville NJ 08232

Purpose of Disbursement:  
 Internet Services

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 07 / 2007

Transaction ID: H4-109919-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.00		19.00		38.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 165 / 963  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

PO Box 17464

City	State	Zip Code
Baltimore	MD	21297-1464

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 17 / 2007

Transaction ID: H4-109941-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.50		47.51		95.01

**B. Full Name (Last, First, Middle Initial)**  
 AT&T

Mailing Address

Payment Center

City	State	Zip Code
Sacramento	CA	95887-0001

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 17 / 2007

Transaction ID: H4-109941-20000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.00		10.00		20.00

**C. Full Name (Last, First, Middle Initial)**  
 Judy Loeb Goldfiend

Mailing Address

50 East 89th St 6E

City	State	Zip Code
New York	NY	10128

Purpose of Disbursement:  
 Rent

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 23 / 2007

Transaction ID: H4-109974-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
600.00		600.00		1200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 166 / 963  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

EMILY's List

**A. Full Name (Last, First, Middle Initial)**  
Rochelle Levin Sachs

Mailing Address

22800 SW 157th Ave

City	State	Zip Code
Miami	FL	33170

Purpose of Disbursement:  
Rent

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 23 / 2007

Transaction ID: H4-109982-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

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

Mailing Address

PO Box 15879

City	State	Zip Code
Houston	TX	77220

Purpose of Disbursement:  
Rent

Category/  
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 05 / 23 / 2007

Transaction ID: H4-109983-10000

**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
362838.83	363687.70	726526.53

# **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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Bank of America**

Mailing Address 1501 Pennsylvania Ave. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Credit Card Service Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110172

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

44.95

Full Name (Last, First, Middle Initial)

## **B. Melissa Bean for Congress**

Mailing Address 933 Van Buren #301

City Chicago State IL Zip Code 60607

Purpose of Disbursement  
In-Kind Mailing List

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110026

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

69.36

Full Name (Last, First, Middle Initial)

## **C. Kathy Castor for Congress**

Mailing Address PO Box 5419

City Tampa State FL Zip Code 33675

Purpose of Disbursement  
In-Kind Mailing List

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110027

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

61.86

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

176.17

**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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Elizabeth Colton		<b>Transaction ID:</b> SB21B-110019 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 7</div> </div>
Mailing Address 1848 Pine Street		<b>Amount of Each Disbursement this Period</b> <div>1110.23</div>
City San Francisco State CA Zip Code 94109		
Purpose of Disbursement In Kind Catering & Facilities		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Kirsten Gillibrand for Congress		<b>Transaction ID:</b> SB21B-110028 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 7</div> </div>
Mailing Address PO Box 1279		<b>Amount of Each Disbursement this Period</b> <div>113.04</div>
City Hudson State NY Zip Code 12534		
Purpose of Disbursement In-Kind Mailing List		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Mazie Hirono		<b>Transaction ID:</b> SB21B-110029 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 7</div> </div>
Mailing Address 505 Ward Avenue Suite 207		<b>Amount of Each Disbursement this Period</b> <div>56.10</div>
City Honolulu State HI Zip Code 96814		
Purpose of Disbursement In-Kind Mailing List		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

1279.37

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** McCaskill for Missouri

Mailing Address PO Box 6771

City State Zip Code  
St Louis MO 63144

Purpose of Disbursement  
In-Kind Mailing List

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-110023

Date of Disbursement

/   /

Amount of Each Disbursement this Period

151.50

Full Name (Last, First, Middle Initial)

**B.** Schwartz for Congress

Mailing Address PO Box 45706

City State Zip Code  
Philadelphia PA 19149

Purpose of Disbursement  
In-Kind Mailing List

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-110025

Date of Disbursement

/   /

Amount of Each Disbursement this Period

447.36

Full Name (Last, First, Middle Initial)

**C.** Cantwell 2006

Mailing Address PO Box 61528

City State Zip Code  
Vancouver WA 98666

Purpose of Disbursement  
In-Kind Mailing List

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-110020

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.06

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

1048.92

**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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Klobuchar for Minnesota		<b>Transaction ID:</b> SB21B-110022 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 7</div> </div>
Mailing Address PO Box 4146		<b>Amount of Each Disbursement this Period</b> <div>585.96</div>
City St Paul State MN Zip Code 55104		
Purpose of Disbursement In-Kind Mailing List		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Giffords for Congress		<b>Transaction ID:</b> SB21B-110021 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 7</div> </div>
Mailing Address PO Box 27565		<b>Amount of Each Disbursement this Period</b> <div>132.06</div>
City Tucson State AZ Zip Code 85726		
Purpose of Disbursement In-Kind Mailing List		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Stabenow for Senate		<b>Transaction ID:</b> SB21B-110024 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 7</div> </div>
Mailing Address P.O. Box 4945		<b>Amount of Each Disbursement this Period</b> <div>419.28</div>
City E. Lansing State MI Zip Code 48826		
Purpose of Disbursement In-Kind Mailing List		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1137.30</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Sutton for Congress**

Mailing Address 1700 W. Market Street, #155

City Akron State OH Zip Code 44313

Purpose of Disbursement  
In-Kind Mailing List

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110030

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

30.06

Full Name (Last, First, Middle Initial)

## **B. Woolsey for Congress**

Mailing Address 621 Western Avenue

City Petaluma State CA Zip Code 94952

Purpose of Disbursement  
In-Kind Mailing List

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110031

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

71.40

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address P.O. Box 0001

City Chicago State IL Zip Code 60679

Purpose of Disbursement  
Credit Card Service Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110038

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

4.50

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

105.96

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Bank of America**

Mailing Address 1501 Pennsylvania Ave. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Credit Card Service Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110219

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

6844.49

## **B. Bulletproof**

Full Name (Last, First, Middle Initial)

Mailing Address 1840 41st Ave, #102-333

City Capitola State CA Zip Code 95010

Purpose of Disbursement  
Copy Writer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109565

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

25.00

## **C. C.F. Folks**

Full Name (Last, First, Middle Initial)

Mailing Address 1225 19th Street, N.W.

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Catering/Facilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109570

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

331.33

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

7200.82

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Condor Communications**

Mailing Address 5520 Connecticut Ave, NW

City Washington State DC Zip Code 20015

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109572

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

5393.25

## **B. Condor Communications**

Mailing Address 5520 Connecticut Ave, NW

City Washington State DC Zip Code 20015

Purpose of Disbursement  
Event Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109573

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

761.40

## **C. CustomScoop**

Mailing Address PO Box 609

City Concord State NH Zip Code 03302

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109575

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

750.00

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

6904.65

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Diverse Office Solutions**

Mailing Address 9228 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109577

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

69.35

Full Name (Last, First, Middle Initial)

## **B. Diverse Office Solutions**

Mailing Address 9228 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109578

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

321.35

Full Name (Last, First, Middle Initial)

## **C. Diverse Office Solutions**

Mailing Address 9228 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109580

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

33.31

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

424.01

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 175 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Katrina Kugel		<b>Transaction ID:</b> SB21B-109584 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 0 7</div> </div>
Mailing Address 2813 Covington Rd		<b>Amount of Each Disbursement this Period</b> <div>75.43</div>
City Silver Spring State MD Zip Code 20910		
Purpose of Disbursement Travel/Accommodation/Meals	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Production Solutions, Inc.		<b>Transaction ID:</b> SB21B-109594 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 0 7</div> </div>
Mailing Address 1953 Gallows Road Suite 600		<b>Amount of Each Disbursement this Period</b> <div>581.55</div>
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Office Supplies Expenses	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Production Solutions, Inc.		<b>Transaction ID:</b> SB21B-109595 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 0 7</div> </div>
Mailing Address 1953 Gallows Road Suite 600		<b>Amount of Each Disbursement this Period</b> <div>427.95</div>
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Deliveries	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1084.93</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109596

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

5618.00

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109597

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

28.78

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Direct Mail Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109598

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

5483.66

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

11130.44

**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)

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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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109599

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15300.00

Full Name (Last, First, Middle Initial)

## **B. Working Assets**

Mailing Address P.O. Box 2041

City Mechanicsburg State PA Zip Code 17055

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109954

Date of Disbursement

/   /

Amount of Each Disbursement this Period

302.23

Full Name (Last, First, Middle Initial)

## **C. Starfish Design Carolyn M. Coon**

Mailing Address 106 Kidwell Avenue

City Centreville State MD Zip Code 21617

Purpose of Disbursement  
Design/Graphics

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

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

15752.23

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Starfish Design Carolyn M. Coon

Mailing Address 106 Kidwell Avenue

City State Zip Code  
Centreville MD 21617

Purpose of Disbursement  
Design/Graphics

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109606

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**B.** Starfish Design Carolyn M. Coon

Mailing Address 106 Kidwell Avenue

City State Zip Code  
Centreville MD 21617

Purpose of Disbursement  
Design/Graphics

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109607

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C.** Starfish Design Carolyn M. Coon

Mailing Address 106 Kidwell Avenue

City State Zip Code  
Centreville MD 21617

Purpose of Disbursement  
Design/Graphics

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109608

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

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

450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Starfish Design Carolyn M. Coon		<b>Transaction ID:</b> SB21B-109609 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 0 7</div> </div>
Mailing Address 106 Kidwell Avenue		<b>Amount of Each Disbursement this Period</b> <div>225.25</div>
City Centreville State MD Zip Code 21617		
Purpose of Disbursement Design/Graphics Candidate Name	<div>Category/Type</div>	
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>B.</b> Full Name (Last, First, Middle Initial) Triplex Direct Marketing		<b>Transaction ID:</b> SB21B-109610 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 0 7</div> </div>
Mailing Address PO Box 3603		<b>Amount of Each Disbursement this Period</b> <div>71.29</div>
City Omaha State NE Zip Code 68103-0603		
Purpose of Disbursement List Rental Candidate Name	<div>Category/Type</div>	
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>C.</b> Full Name (Last, First, Middle Initial) Triplex Direct Marketing		<b>Transaction ID:</b> SB21B-109611 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 0 7</div> </div>
Mailing Address PO Box 3603		<b>Amount of Each Disbursement this Period</b> <div>88.57</div>
City Omaha State NE Zip Code 68103-0603		
Purpose of Disbursement List Rental Candidate Name	<div>Category/Type</div>	
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) ..... ►

385.11

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Triplex Direct Marketing**

Mailing Address PO Box 3603

City Omaha State NE Zip Code 68103-0603

Purpose of Disbursement  
List Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109612

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

140.25

Full Name (Last, First, Middle Initial)

## **B. Triplex Direct Marketing**

Mailing Address PO Box 3603

City Omaha State NE Zip Code 68103-0603

Purpose of Disbursement  
List Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109613

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

284.64

Full Name (Last, First, Middle Initial)

## **C. Triplex Direct Marketing**

Mailing Address PO Box 3603

City Omaha State NE Zip Code 68103-0603

Purpose of Disbursement  
List Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109614

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

93.22

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

518.11

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Triplex Direct Marketing**

Mailing Address PO Box 3603

City Omaha State NE Zip Code 68103-0603

Purpose of Disbursement  
List Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109615

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

297.94

Full Name (Last, First, Middle Initial)

## **B. United Parcel Service**

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109619

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

84.90

Full Name (Last, First, Middle Initial)

## **C. U. S. Postal Service**

Mailing Address 1501 Connecticut Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109620

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

1120.14

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

1502.98

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mary Jane Volk

Mailing Address 541 E. Nelson Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

110.53

Full Name (Last, First, Middle Initial)

**B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109626

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2433.06

Full Name (Last, First, Middle Initial)

**C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109627

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6845.49

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

9389.08

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109628

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

629.66

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109629

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

1429.85

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109630

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

14517.62

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

16577.13

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109631

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

25115.12

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109632

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

577.59

Full Name (Last, First, Middle Initial)

## **C.** American Express

Mailing Address P.O. Box 0001

City Chicago State IL Zip Code 60679

Purpose of Disbursement  
Credit Card Service Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-110037

Date of Disbursement

05 / 04 / 2007

Amount of Each Disbursement this Period

1309.87

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

27002.58

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 185 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) GSI - Gordon & Schwenkmeyer		<b>Transaction ID:</b> SB21B-110212 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 7</div> </div>
Mailing Address 300 N Sepulveda Blvd #2050		<b>Amount of Each Disbursement this Period</b> <div>41.51</div>
City El Segundo State CA Zip Code 90245		
Purpose of Disbursement Credit Card Service Charges	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Judith Ratzan		<b>Transaction ID:</b> SB21B-110174 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 7 / 2 0 0 7</div> </div>
Mailing Address 60 Edgewater Dr.		<b>Amount of Each Disbursement this Period</b> <div>1727.80</div>
City Coral Gables State FL Zip Code 33133		
Purpose of Disbursement In Kind Catering & Facilities	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Adams		<b>Transaction ID:</b> SB21B-109646 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 0 7</div> </div>
Mailing Address 306 S St. NW		<b>Amount of Each Disbursement this Period</b> <div>81.50</div>
City Washington State DC Zip Code 20002		
Purpose of Disbursement Temporary Help	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

1850.81

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address Suite 0001

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109647

Date of Disbursement

/   /

Amount of Each Disbursement this Period

853.95

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address Suite 0001

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109648

Date of Disbursement

/   /

Amount of Each Disbursement this Period

185.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address Suite 0001

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109653

Date of Disbursement

/   /

Amount of Each Disbursement this Period

338.04

See Attached Memo Entry

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

1376.99

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109654

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

685.79

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Travel/Accom/Meals /Internet

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109658

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

1644.23

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109659

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

31.00

See Attached Memo Entry

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

2361.02

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109660

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

185.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109661

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

274.49

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address Suite 0001

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109662

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

3491.76

See Attached Memo Entry

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

3951.25

**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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address Suite 0001

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

49.60

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address Suite 0001

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109667

Date of Disbursement

/   /

Amount of Each Disbursement this Period

786.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109669

Date of Disbursement

/   /

Amount of Each Disbursement this Period

63.54

See Attached Memo Entry

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

899.14

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109670

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

39.21

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109671

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

570.11

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109672

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

877.33

See Attached Memo Entry

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

1486.65

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A. Avalon Consulting Group Inc**

Mailing Address 1150 17th Street NW  
Suite 200

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Consulting Fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B-109677**

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**B. Avalon Consulting Group Inc**

Mailing Address 1150 17th Street NW  
Suite 200

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Consulting Fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B-109678**

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. John Bates**

Mailing Address 835 Polk Street

City Port Townsend State WA Zip Code 98368

Purpose of Disbursement  
Copy Writer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B-109680**

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

1500.00

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

10500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 192 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Beaconfire Consulting Inc.

Mailing Address 2300 Clarendon Blvd  
Suite 1100

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109681

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

420.00

Full Name (Last, First, Middle Initial)

## **B.** Bulletproof

Mailing Address 1840 41st Ave, #102-333

City Capitola State CA Zip Code 95010

Purpose of Disbursement  
Copy Writer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109682

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

## **C.** Clicks

Mailing Address 320 Ft Duquesne Blvd  
Suite 300

City Pittsburg State PA Zip Code 15222

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109683

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

75.20

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

530.20

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 193 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Cathleen Costello

Mailing Address 1308 Forest Glen Dr. South

City Winnetka State IL Zip Code 60093

Purpose of Disbursement  
Temporary Help

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109686

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

36.00

Full Name (Last, First, Middle Initial)

**B.** Yolanda Covington

Mailing Address 459 Massachusetts Ave, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Temporary Help

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109687

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

81.50

Full Name (Last, First, Middle Initial)

**C.** Getactive Software, Inc. Convio, Inc.

Mailing Address 11921 N. Mopac Expressway #200

City Austin State TX Zip Code 78759

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109692

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

3000.00

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

3117.50

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 194 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Gordon and Schwenkmeyer, Inc.		<b>Transaction ID:</b> SB21B-109693 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 0 7</div> </div>
Mailing Address 300 N. Sepulveda Blvd. Suite 2050		<b>Amount of Each Disbursement this Period</b> <div>9305.04</div>
City El Segundo State CA Zip Code 90245		
Purpose of Disbursement Phone Banks	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Gordon and Schwenkmeyer, Inc.		<b>Transaction ID:</b> SB21B-109694 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 0 7</div> </div>
Mailing Address 300 N. Sepulveda Blvd. Suite 2050		<b>Amount of Each Disbursement this Period</b> <div>64668.45</div>
City El Segundo State CA Zip Code 90245		
Purpose of Disbursement Phone Banks	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Faith B. Kerr		<b>Transaction ID:</b> SB21B-109698 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 0 7</div> </div>
Mailing Address 44 Summit Street		<b>Amount of Each Disbursement this Period</b> <div>14.00</div>
City Ivoryton State CT Zip Code 06442		
Purpose of Disbursement Copy Writer	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>73987.49</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Faith B. Kerr		<b>Transaction ID:</b> SB21B-109699 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	0		2	0	0	7													
Mailing Address 44 Summit Street		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>28.00</td> </tr> </table>	28.00																			
28.00																						
City Ivoryton State CT Zip Code 06442																						
Purpose of Disbursement Copy Writer																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Faith B. Kerr		<b>Transaction ID:</b> SB21B-109700 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	0		2	0	0	7													
Mailing Address 44 Summit Street		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>7.00</td> </tr> </table>	7.00																			
7.00																						
City Ivoryton State CT Zip Code 06442																						
Purpose of Disbursement Copy Writer																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) LK Photos		<b>Transaction ID:</b> SB21B-109702 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	0		2	0	0	7													
Mailing Address Leslie E. Kossoff 5225 Pooks Hill Road		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>3288.50</td> </tr> </table>	3288.50																			
3288.50																						
City Bethesda State MD Zip Code 20814																						
Purpose of Disbursement Event Supplies																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

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

**3323.50**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ellen L Moran		<b>Transaction ID:</b> SB21B-109707 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address 8220 Custer Rd		<b>Amount of Each Disbursement this Period</b> <div>152.15</div>
City Bethesda State MD Zip Code 20817		
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Allison Muehlenbeck		<b>Transaction ID:</b> SB21B-109708 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address 511 Marina Avenue		<b>Amount of Each Disbursement this Period</b> <div>25.98</div>
City Coronado State CA Zip Code 92118		
Purpose of Disbursement Travel/Accommodation/Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Penn. Turnpike Commission Attn: Systems Audit Division		<b>Transaction ID:</b> SB21B-109709 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address PO Box 67676		<b>Amount of Each Disbursement this Period</b> <div>7.50</div>
City Harrisburg State PA Zip Code 17106-7676		
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>185.63</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mary K Phillips

Mailing Address 459 Massachusetts Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Temporary Help

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109710

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

81.50

Full Name (Last, First, Middle Initial)

**B.** PR Newswire Assoc, LLC

Mailing Address G.P.O. Box 5897

City New York State NY Zip Code 10087-5897

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109711

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

433.58

Full Name (Last, First, Middle Initial)

**C.** PR Newswire Assoc, LLC

Mailing Address G.P.O. Box 5897

City New York State NY Zip Code 10087-5897

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109712

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

544.61

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

1059.69

**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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** PR Newswire Assoc, LLC

Mailing Address G.P.O. Box 5897

City State Zip Code  
New York NY 10087-5897

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109713

Date of Disbursement

/   /

Amount of Each Disbursement this Period

158.63

Full Name (Last, First, Middle Initial)

**B.** PR Newswire Assoc, LLC

Mailing Address G.P.O. Box 5897

City State Zip Code  
New York NY 10087-5897

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109714

Date of Disbursement

/   /

Amount of Each Disbursement this Period

449.44

Full Name (Last, First, Middle Initial)

**C.** PR Newswire Assoc, LLC

Mailing Address G.P.O. Box 5897

City State Zip Code  
New York NY 10087-5897

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109715

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.93

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

809.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. PR Newswire Assoc, LLC**

Mailing Address G.P.O. Box 5897

City New York State NY Zip Code 10087-5897

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109716

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

126.90

Full Name (Last, First, Middle Initial)

## **B. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109717

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

161.64

Full Name (Last, First, Middle Initial)

## **C. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109718

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

3520.83

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

3809.37

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109719

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

218.28

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109720

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

855.33

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109721

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

11740.61

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

12814.22

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



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

Use separate schedule(s)  
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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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109722

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

869.13

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109723

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

3950.87

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109724

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

273.96

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

5093.96

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109725

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

822.49

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109726

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

12824.63

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109727

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

960.87

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

14607.99

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

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

Use separate schedule(s)  
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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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109728

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

438.53

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109729

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

64890.69

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109730

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

46792.63

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

112121.85

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109731

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

72.20

Full Name (Last, First, Middle Initial)

## **B. Public Interest Communications**

Mailing Address 7700 Leesburg Pike  
Suite 301 North

City Falls Church State VA Zip Code 22043

Purpose of Disbursement  
Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109733

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

545.50

Full Name (Last, First, Middle Initial)

## **C. Red Top Cab**

Mailing Address P.O. Box 100519

City Arlington State VA Zip Code 22210

Purpose of Disbursement  
Local Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109734

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

25.88

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

643.58

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Tiffany Reed

Mailing Address 2450 Ontario Rd, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109735

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

26.84

Full Name (Last, First, Middle Initial)

**B.** Edna Romero

Mailing Address 7111 Halleck Street

City District Heights State MD Zip Code 20747

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109737

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

90.05

Full Name (Last, First, Middle Initial)

**C.** Edna Romero

Mailing Address 7111 Halleck Street

City District Heights State MD Zip Code 20747

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109738

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

131.00

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

247.89

**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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Edna Romero		<b>Transaction ID:</b> SB21B-109739 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 0 7</div> </div>	
Mailing Address 7111 Halleck Street		<b>Amount of Each Disbursement this Period</b> <div>5.00</div>	
City District Heights State MD Zip Code 20747	Purpose of Disbursement Travel/Accommodation/Meals Candidate Name	<div>Category/Type</div>	
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>B.</b> Full Name (Last, First, Middle Initial) Share Group		<b>Transaction ID:</b> SB21B-109742 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 0 7</div> </div>	
Mailing Address PO Box 55183		<b>Amount of Each Disbursement this Period</b> <div>4503.20</div>	
City Boston State MA Zip Code 02205-5183	Purpose of Disbursement Phone Banks Candidate Name	<div>Category/Type</div>	
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>C.</b> Full Name (Last, First, Middle Initial) Rebecca Turner		<b>Transaction ID:</b> SB21B-109745 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 0 7</div> </div>	
Mailing Address 459 Massachusetts Ave NW		<b>Amount of Each Disbursement this Period</b> <div>77.25</div>	
City Washington State DC Zip Code 20001	Purpose of Disbursement Temporary Help Candidate Name	<div>Category/Type</div>	
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) .....

**4585.45**

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. United Parcel Service**

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109748

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

95.81

Full Name (Last, First, Middle Initial)

## **B. Joanne Wilson**

Mailing Address 3806 Viser Court

City Bowie State MD Zip Code 20715

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109749

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

127.96

Full Name (Last, First, Middle Initial)

## **C. JoDee Winterhoff**

Mailing Address 110 10th Street #307

City Des Moines State IA Zip Code 50309

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109750

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

289.50

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

513.27

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109754

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

7200.00

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109755

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109756

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

2400.00

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

10400.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109757

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

17500.00

Full Name (Last, First, Middle Initial)

## **B. Paychex**

Mailing Address 3060 Williams Drive #300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Payroll Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110095

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

588.16

Full Name (Last, First, Middle Initial)

## **C. Paychex**

Mailing Address 3060 Williams Drive #300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Payroll Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110039

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

56.00

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

18144.16

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109763

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

467.90

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Parking Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109764

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

19.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109765

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

942.97

See Attached Memo Entry

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

1429.87

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address P.O. Box 2853

City State Zip Code  
New York NY 10116-2853

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109770

Date of Disbursement

/   /

Amount of Each Disbursement this Period

275.50

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109811

Date of Disbursement

/   /

Amount of Each Disbursement this Period

93.13

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Meeting/Conference

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109812

Date of Disbursement

/   /

Amount of Each Disbursement this Period

898.00

See Attached Memo Entry

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

1266.63

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109813

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1463.46

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109814

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

6820.88

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109815

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

2112.77

See Attached Memo Entry

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

10397.11

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 213 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109816

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1300.40

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109817

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

150.81

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109818

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

81450.03

See Attached Memo Entry

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

82901.24

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 214 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accom/Meals Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109775

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3657.51

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109777

Date of Disbursement

/   /

Amount of Each Disbursement this Period

827.61

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Parking Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109780

Date of Disbursement

/   /

Amount of Each Disbursement this Period

288.00

See Attached Memo Entry

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

4773.12

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 215 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109781

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

135.44

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109782

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

37.40

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109783

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

292.60

See Attached Memo Entry

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

465.44

**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)

PAGE 216 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109787

Date of Disbursement

/   /

Amount of Each Disbursement this Period

526.19

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109788

Date of Disbursement

/   /

Amount of Each Disbursement this Period

907.23

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address P.O. Box 360001

City State Zip Code  
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109793

Date of Disbursement

/   /

Amount of Each Disbursement this Period

838.23

See Attached Memo Entry

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

2271.65

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** American Express

Mailing Address PO Box 360001

City State Zip Code  
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals/Office

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109794

Date of Disbursement

/   /

Amount of Each Disbursement this Period

276.67

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

**B.** American Express

Mailing Address PO Box 360001

City State Zip Code  
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109795

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1078.51

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

**C.** American Express

Mailing Address PO Box 360001

City State Zip Code  
Ft Lauderdale FL 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109796

Date of Disbursement

/   /

Amount of Each Disbursement this Period

656.80

See Attached Memo Entry

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

2011.98

**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)

PAGE 218 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109797

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1662.52

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109799

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

319.14

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109800

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

34.55

See Attached Memo Entry

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

2016.21

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109803

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

2334.55

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

## **B. Bank of America**

Mailing Address 1501 Pennsylvania Ave. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110040

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

1233.95

Full Name (Last, First, Middle Initial)

## **C. Diverse Office Solutions**

Mailing Address 9228 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109912

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

12.67

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

3581.17

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 220 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Andrea E Gottfried

Mailing Address 414 Wynnerwood Road

City Pelham Manor State NY Zip Code 10803

Purpose of Disbursement  
Travel/Accommodation /Meals/Office

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109916

Date of Disbursement

/   /

Amount of Each Disbursement this Period

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

**B.** Karick & Associates

Mailing Address 5102 Wood Duck Lane

City Richmond State IL Zip Code 60071

Purpose of Disbursement  
Copy Writer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109918

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.** Lake Research Partners

Mailing Address 1726 M Street, NW, Ste 500

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109921

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**7165.76**

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Lake Research Partners**

Mailing Address 1726 M Street, NW, Ste 500

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109922

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

109.81

Full Name (Last, First, Middle Initial)

## **B. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109923

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

303.82

Full Name (Last, First, Middle Initial)

## **C. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Direct Mail Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109924

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

2274.20

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

2687.83

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 222 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109927

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

157.05

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Direct Mail Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109928

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

390.31

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109929

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

550.00

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

1097.36

**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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-110223

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1022.77

Full Name (Last, First, Middle Initial)

## **B. Rackspace Managed Hosting**

Mailing Address PO Box 671337

City Dallas State TX Zip Code 75267-1337

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109931

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1350.00

Full Name (Last, First, Middle Initial)

## **C. Roll Call**

Mailing Address 50 F St., NW, 7th Floor

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Employee Recruitment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109932

Date of Disbursement

/   /

Amount of Each Disbursement this Period

801.00

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

3173.77

**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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Starfish Design Carolyn M. Coon		<b>Transaction ID:</b> SB21B-109933 <b>Date of Disbursement</b> <div> <div>05</div> <div>17</div> <div>2007</div> </div>
Mailing Address 106 Kidwell Avenue		<b>Amount of Each Disbursement this Period</b> <div>75.00</div>
City Centreville State MD Zip Code 21617		
Purpose of Disbursement Design/Graphics Candidate Name	<div>Category/Type</div>	
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>B.</b> Full Name (Last, First, Middle Initial) United Parcel Service		<b>Transaction ID:</b> SB21B-109936 <b>Date of Disbursement</b> <div> <div>05</div> <div>17</div> <div>2007</div> </div>
Mailing Address P. O. Box 7247-0244		<b>Amount of Each Disbursement this Period</b> <div>80.62</div>
City Philadelphia State PA Zip Code 19170-0001		
Purpose of Disbursement Deliveries Candidate Name	<div>Category/Type</div>	
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>C.</b> Full Name (Last, First, Middle Initial) Amy Zellerbach		<b>Transaction ID:</b> SB21B-109943 <b>Date of Disbursement</b> <div> <div>05</div> <div>17</div> <div>2007</div> </div>
Mailing Address 1168 Greenwich St #2		<b>Amount of Each Disbursement this Period</b> <div>123.00</div>
City San Francisco State CA Zip Code 94109		
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	<div>Category/Type</div>	
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) .....

**278.62**

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109944

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109945

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

1047.96

Full Name (Last, First, Middle Initial)

## **C.** U. S. Postal Service

Mailing Address 1501 Connecticut Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109946

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

5000.00

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

6797.96

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Gordon and Schwenkmeyer, Inc.

Mailing Address 300 N. Sepulveda Blvd.  
Suite 2050

City El Segundo State CA Zip Code 90245

Purpose of Disbursement

Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110211

Date of Disbursement

05 / 18 / 2007

Amount of Each Disbursement this Period

5298.67

Full Name (Last, First, Middle Initial)

**B.** Jack I. Bender & Sons

Mailing Address 1120 Connecticut Ave, NW  
Suite 1200

City Washington State DC Zip Code 20036

Purpose of Disbursement

Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109962

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

4200.00

Full Name (Last, First, Middle Initial)

**C.** Bulletproof

Mailing Address 1840 41st Ave, #102-333

City Capitola State CA Zip Code 95010

Purpose of Disbursement

Copy Writer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109963

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

40.00

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

9538.67

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. The Feldman Group Inc.**

Mailing Address 508-510 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Polling/Surveys

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109965

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

310.00

Full Name (Last, First, Middle Initial)

## **B. Cingular Wireless**

Mailing Address PO Box 17356

City Baltimore State MD Zip Code 21297-1356

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109966

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

169.22

Full Name (Last, First, Middle Initial)

## **C. Colonial Parking, Inc.**

Mailing Address 1050 Thomas Jefferson St., NW  
#100

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Parking Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109968

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

630.00

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

1109.22

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Direct Advantage Marketing**

Mailing Address PO Box 55043

City Boston State MA Zip Code 02205

Purpose of Disbursement

Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109969

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

3076.50

Full Name (Last, First, Middle Initial)

## **B. Gordon and Schwenkmeyer, Inc.**

Mailing Address 300 N. Sepulveda Blvd.  
Suite 2050

City El Segundo State CA Zip Code 90245

Purpose of Disbursement

Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109975

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

355.57

Full Name (Last, First, Middle Initial)

## **C. Interstate Express**

Mailing Address PO Box 30091

City Bethesda State MD Zip Code 20824

Purpose of Disbursement

Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109976

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

30.80

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

3462.87

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Interstate Express**

Mailing Address PO Box 30091

City Bethesda State MD Zip Code 20824

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109977

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

30.80

Full Name (Last, First, Middle Initial)

## **B. Karick & Associates**

Mailing Address 5102 Wood Duck Lane

City Richmond State IL Zip Code 60071

Purpose of Disbursement  
Copy Writer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109978

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

12.50

Full Name (Last, First, Middle Initial)

## **C. Karick & Associates**

Mailing Address 5102 Wood Duck Lane

City Richmond State IL Zip Code 60071

Purpose of Disbursement  
Copy Writer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109979

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

12.50

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

55.80

**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)  
EMILY's List

<b>A.</b> Karick & Associates Full Name (Last, First, Middle Initial) Mailing Address 5102 Wood Duck Lane City Richmond State IL Zip Code 60071 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109980 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Amount of Each Disbursement this Period</b> 12.50
<b>B.</b> Karick & Associates Full Name (Last, First, Middle Initial) Mailing Address 5102 Wood Duck Lane City Richmond State IL Zip Code 60071 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109981 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Amount of Each Disbursement this Period</b> 12.50
<b>C.</b> Merkle Response Services Inc Full Name (Last, First, Middle Initial) Mailing Address 13331 Pennsylvania Ave City Hagerstown State MD Zip Code 21742 Purpose of Disbursement Data Management Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109984 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Amount of Each Disbursement this Period</b> 728.32
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>753.32</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Merkle Response Services Inc**

Mailing Address 13331 Pennsylvania Ave

City Hagerstown State MD Zip Code 21742

Purpose of Disbursement  
Data Management

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109985

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

231.44

Full Name (Last, First, Middle Initial)

## **B. NCEC Services Inc.**

Mailing Address 122 C Street, NW #650

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109986

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

## **C. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109987

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

6866.02

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

19597.46

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Share Group**

Mailing Address PO Box 55183

City Boston State MA Zip Code 02205-5183

Purpose of Disbursement

Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109989

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

405.60

Full Name (Last, First, Middle Initial)

## **B. Share Group**

Mailing Address PO Box 55183

City Boston State MA Zip Code 02205-5183

Purpose of Disbursement

Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109990

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

2554.30

Full Name (Last, First, Middle Initial)

## **C. Share Group**

Mailing Address PO Box 55183

City Boston State MA Zip Code 02205-5183

Purpose of Disbursement

Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109991

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

8336.52

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

11296.42

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 233 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Sheads & Associates, Ltd.

Mailing Address Prince William Square  
303 Post Office Rd. Bldg A

City Waldorf State MD Zip Code 20602

Purpose of Disbursement  
Contribution Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109992

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

861.49

Full Name (Last, First, Middle Initial)

**B.** Staples

Mailing Address Dept DC 85105  
PO Box 30851

City Hartford State CT Zip Code 06150-0851

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109994

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

28.45

Full Name (Last, First, Middle Initial)

**C.** Staples

Mailing Address Dept DC 85105  
PO Box 30851

City Hartford State CT Zip Code 06150-0851

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109995

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

149.11

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

1039.05

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 234 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Staples

Mailing Address Dept DC 85105  
PO Box 30851

City Hartford State CT Zip Code 06150-0851

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109996

Date of Disbursement

/   /

Amount of Each Disbursement this Period

59.96

Full Name (Last, First, Middle Initial)

**B.** Starfish Design Carolyn M. Coon

Mailing Address 106 Kidwell Avenue

City Centreville State MD Zip Code 21617

Purpose of Disbursement  
Design/Graphics

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109997

Date of Disbursement

/   /

Amount of Each Disbursement this Period

116.45

Full Name (Last, First, Middle Initial)

**C.** Starfish Design Carolyn M. Coon

Mailing Address 106 Kidwell Avenue

City Centreville State MD Zip Code 21617

Purpose of Disbursement  
Design/Graphics

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109998

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.87

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

182.28

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 235 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Starfish Design Carolyn M. Coon

Mailing Address 106 Kidwell Avenue

City State Zip Code  
Centreville MD 21617

Purpose of Disbursement  
Design/Graphics

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109999

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

**B.** Starfish Design Carolyn M. Coon

Mailing Address 106 Kidwell Avenue

City State Zip Code  
Centreville MD 21617

Purpose of Disbursement  
Design/Graphics

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110000

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

317.68

Full Name (Last, First, Middle Initial)

**C.** Triplex Direct Marketing

Mailing Address PO Box 3603

City State Zip Code  
Omaha NE 68103-0603

Purpose of Disbursement  
List Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110001

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

109.02

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

436.70

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 236 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Triplex Direct Marketing**

Mailing Address PO Box 3603

City Omaha State NE Zip Code 68103-0603

Purpose of Disbursement  
List Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110002

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

109.02

Full Name (Last, First, Middle Initial)

## **B. Type-A-Scan, Inc.**

Mailing Address 39 West 19th Street  
7th Floor

City New York State NY Zip Code 10011

Purpose of Disbursement  
Data Management

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110003

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

256.91

Full Name (Last, First, Middle Initial)

## **C. U. S. Postal Service**

Mailing Address 1501 Connecticut Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110005

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

211.00

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

576.93

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 237 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110010

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.28

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110011

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2106.00

Full Name (Last, First, Middle Initial)

## **C.** American Express

Mailing Address P.O. Box 0001

City Chicago State IL Zip Code 60679

Purpose of Disbursement  
Credit Card Service Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110096

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2877.24

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

4992.52

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 238 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Channing Ansley

Mailing Address 437 N Street SW

City Washington State DC Zip Code 20024

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110043

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

**B.** Mary Beth Cahill

Mailing Address 4800 Dexter Street, NW

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110044

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

397.06

Full Name (Last, First, Middle Initial)

**C.** Direct Advantage Marketing

Mailing Address PO Box 55043

City Boston State MA Zip Code 02205

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110046

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

1688.82

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

2145.88

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 239 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Direct Advantage Marketing**

Mailing Address PO Box 55043

City Boston State MA Zip Code 02205

Purpose of Disbursement

Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110047

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

2275.05

Full Name (Last, First, Middle Initial)

## **B. Peter D. Hart Research Inc.**

Mailing Address 1724 Connecticut Ave., NW

City Washington State DC Zip Code 20009

Purpose of Disbursement

Polling/Surveys

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110054

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

## **C. Faith B. Kerr**

Mailing Address 44 Summit Street

City Ivoryton State CT Zip Code 06442

Purpose of Disbursement

Copy Writer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-110058

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

14.00

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

9789.05

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 240 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Laila Mohib		<b>Transaction ID:</b> SB21B-110059 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		3	1		2	0	0	7													
Mailing Address 616 E Street N.W. Apt 712		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">11.00</td> </tr> </table>	11.00																			
11.00																						
City Washington State DC Zip Code 20004																						
Purpose of Disbursement Travel/Accommodation/Meals																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Laila Mohib		<b>Transaction ID:</b> SB21B-110060 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		3	1		2	0	0	7													
Mailing Address 616 E Street N.W. Apt 712		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">80.00</td> </tr> </table>	80.00																			
80.00																						
City Washington State DC Zip Code 20004																						
Purpose of Disbursement Travel/Accommodation/Meals																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Production Solutions, Inc.		<b>Transaction ID:</b> SB21B-110064 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		3	1		2	0	0	7													
Mailing Address 1953 Gallows Road Suite 600		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">82.50</td> </tr> </table>	82.50																			
82.50																						
City Vienna State VA Zip Code 22182																						
Purpose of Disbursement Deliveries																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td colspan="10">173.50</td> </tr> </table>	173.50																			
173.50																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 241 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Direct Mail Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110065

Date of Disbursement

/   /

Amount of Each Disbursement this Period

445.00

Full Name (Last, First, Middle Initial)

## **B.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110066

Date of Disbursement

/   /

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

## **C.** Production Solutions, Inc.

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110067

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6.66

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

1001.66

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-110068

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

4442.45

Full Name (Last, First, Middle Initial)

## **B. Share Group**

Mailing Address PO Box 55183

City Boston State MA Zip Code 02205-5183

Purpose of Disbursement  
Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-110070

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

13994.64

Full Name (Last, First, Middle Initial)

## **C. Share Group**

Mailing Address PO Box 55183

City Boston State MA Zip Code 02205-5183

Purpose of Disbursement  
Phone Banks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-110071

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

4383.25

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

22820.34

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. United Parcel Service**

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110077

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

11.95

Full Name (Last, First, Middle Initial)

## **B. Working Assets**

Mailing Address P.O. Box 2041

City Mechanicsburg State PA Zip Code 17055

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110081

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

65.14

Full Name (Last, First, Middle Initial)

## **C. Production Solutions, Inc.**

Mailing Address 1953 Gallows Road  
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-110082

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

516.60

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

593.69

**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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Diverse Office Solutions**

Mailing Address 9228 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-110084

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

562.69

Full Name (Last, First, Middle Initial)

## **B. Diverse Office Solutions**

Mailing Address 9228 Gaither Road

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-110087

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

115.22

Full Name (Last, First, Middle Initial)

## **C. Amtrak**

Mailing Address 60 Mass Ave NW

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109647-10000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

319.00

**[MEMO ITEM]**

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

677.91

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 245 / 963

<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)  
EMILY's List

<b>A. Amtrak</b> Full Name (Last, First, Middle Initial) Mailing Address 60 Mass Ave NW City Washington State DC Zip Code 20002 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109647-20000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 29.00 <b>[MEMO ITEM]</b>
<b>B. Eastland Hotel</b> Full Name (Last, First, Middle Initial) Mailing Address 157 High St City Portland State ME Zip Code 04101 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109647-30000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 52.09 <b>[MEMO ITEM]</b>
<b>C. Eastland Hotel</b> Full Name (Last, First, Middle Initial) Mailing Address 157 High St City Portland State ME Zip Code 04101 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109647-40000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 63.13 <b>[MEMO ITEM]</b>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

<b>A. Avis</b> Full Name (Last, First, Middle Initial) Mailing Address 1001 Westbrook St City Portland State ME Zip Code 04102 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109647-50000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 168.63 <b>[MEMO ITEM]</b>
<b>B. Towne Park</b> Full Name (Last, First, Middle Initial) Mailing Address 2660 Woodley Rd NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109647-60000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 23.00 <b>[MEMO ITEM]</b>
<b>C. Towne Park</b> Full Name (Last, First, Middle Initial) Mailing Address 2660 Woodley Rd NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109647-70000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 23.00 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Macaroni Grill

Mailing Address 415 Philbrook Ave

City South Portland State ME Zip Code 04106

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109647-80000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

26.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Street an Co.

Mailing Address 33 Wharf St

City Portland State ME Zip Code 04101

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109647-90000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

122.63

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Macy's

Mailing Address 390 Gorham Rd

City S. Portland State ME Zip Code 04106

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109647-100000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

18.90

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 248 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Citgo 7-11		<b>Transaction ID:</b> SB21B-109647-110000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address 27 Washington Ave		Amount of Each Disbursement this Period <div>7.85</div>
City Portland State ME Zip Code 04101	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) DMA of Washington		<b>Transaction ID:</b> SB21B-109648-10000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address 1615 L St. NW Suite 1100		Amount of Each Disbursement this Period <div>185.00</div>
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Publication & Dues		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Omni Shoreham Hotel		<b>Transaction ID:</b> SB21B-109653-10000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address 2500 Calvert Street NW		Amount of Each Disbursement this Period <div>235.87</div>
City Washington State DC Zip Code 20008	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>



# **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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109653-20000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

4.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Ten Penh**

Mailing Address 1001 Pennsylvania Avenue, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109653-30000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

98.17

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Girard**

Mailing Address 744 Girard St NW # A

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109654-10000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

597.75

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 250 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Panache		<b>Transaction ID:</b> SB21B-109654-20000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>	
Mailing Address 1725 DeSales St NW		Amount of Each Disbursement this Period <div>48.04</div>	
City Washington State DC Zip Code 20036	[MEMO ITEM]		
Purpose of Disbursement Travel/Accommodation /Meals			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
<b>B.</b> Full Name (Last, First, Middle Initial) Luigi's		<b>Transaction ID:</b> SB21B-109654-30000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>	
Mailing Address 1132 19th St, NW		Amount of Each Disbursement this Period <div>40.00</div>	
City Washington State DC Zip Code 20036	[MEMO ITEM]		
Purpose of Disbursement Travel/Accommodation /Meals			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
<b>C.</b> Full Name (Last, First, Middle Initial) T-Mobile Hot Spot		<b>Transaction ID:</b> SB21B-109658-5000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>	
Mailing Address P.O. Box 863957		Amount of Each Disbursement this Period <div>15.20</div>	
City Plano State TX Zip Code 75086	[MEMO ITEM]		
Purpose of Disbursement Internet Services			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 251 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. US Airways**

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109658-20000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

277.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Boston Market**

Mailing Address 1 Fish Pier

City Boston State MA Zip Code 02210

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109658-30000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

8.23

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Electronic Media Systems**

Mailing Address 600 Tower Rd

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109658-40000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

7.95

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 252 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Plaza Hotel**

Mailing Address 401 Ward Parkway

City Kansas City State MO Zip Code 64112

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109658-60000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

278.45

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. T-Mobile Hot Spot**

Mailing Address P.O. Box 863957

City Plano State TX Zip Code 75086

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109658-70000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

9.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109658-80000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

7.73

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 253 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109658-90000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

1024.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Real.com**

Mailing Address PO Box 91123

City Seattle State WA Zip Code 98111

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109658-100000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. MBTA**

Mailing Address 45 High Street, 10th Floor

City Boston State MA Zip Code 02210

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109659-10000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

4.00

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 254 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dulles Airport Mailing Address 45020 Aviation Drive City Sterling State VA Zip Code 20166 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109659-20000 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">27.00</td> </tr> </table> <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	7		27.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	0		2	0	7																								
27.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) DMA of Washington Mailing Address 1615 L St. NW Suite 1100 City Washington State DC Zip Code 20036 Purpose of Disbursement Publication & Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109660-10000 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">185.00</td> </tr> </table> <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	7		185.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	0		2	0	7																								
185.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Au Bon Pain Mailing Address 1100 Massachusetts Ave, City Cambridge State MA Zip Code 02138 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109661-10000 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">12.66</td> </tr> </table> <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	7		12.66									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	0		2	0	7																								
12.66																																
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																													
0.00																																
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 255 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Bread and Butter**

Mailing Address 2245 Massachusetts Ave

City State Zip Code  
Cambridge MA 02140

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109661-20000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Bengal Cafe**

Mailing Address 2263 Massachusetts Ave

City State Zip Code  
Cambridge MA 02140

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109661-30000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

16.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. China Sun Restaurant**

Mailing Address 7 Holland St

City State Zip Code  
Somerville MA 02144

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109661-40000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.95

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 256 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. A Cambridge House B&B**

Mailing Address 2218 Massachusetts Avenue

City Cambridge State MA Zip Code 02314

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109661-50000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

178.80

[MEMO ITEM]

## **B. Burger King**

Mailing Address 18 Terminal C

City East Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109661-60000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

4.46

[MEMO ITEM]

## **C. Nooshi**

Mailing Address 1120 19th St, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109661-80000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

46.19

[MEMO ITEM]

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 257 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109662-10000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

286.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Amtrak**

Mailing Address 60 Mass Ave NW

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109662-20000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

241.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. American Airlines**

Mailing Address PO Box 619612

City DFW Airport State TX Zip Code 75261

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109662-30000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

1698.80

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 258 / 963

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Cassis Travel**

Mailing Address 535 5th Avenue

City State Zip Code  
New York NY 10017

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109662-40000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Marriot**

Mailing Address 1900 Connecticut Ave NW

City State Zip Code  
Washington DC 20036

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109662-50000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

38.37

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. US Airways**

Mailing Address 4000 E. Sky Harbor Blvd

City State Zip Code  
Phoenix AZ 85034

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109662-60000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

405.65

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 259 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Cassis Travel**

Mailing Address 535 5th Avenue

City New York State NY Zip Code 10017

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109662-70000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Cafe Opaline**

Mailing Address 580 Madison Ave

City New York State NY Zip Code 10022

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109662-80000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

48.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Waldorf Astoria**

Mailing Address 100 East 50th Street

City New York State NY Zip Code 10022

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109662-90000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

502.85

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 260 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Washington Parking**

Mailing Address 1 Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109662-100000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. BLS Limousine**

Mailing Address 3088 44th St

City Astoria State NY Zip Code 11103

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109662-110000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

140.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. New York Times**

Mailing Address 229 West 43rd Street

City New York State NY Zip Code 10036

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109666-10000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

49.60

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 261 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109667-10000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

761.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Green Transportation**

Mailing Address 10118 E Burnside St

City Portland State OR Zip Code 27216

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109667-20000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

24.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Talay Thai**

Mailing Address 406 1st St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109669-10000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

35.54

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 262 / 963

<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)  
EMILY's List

<b>A. Towne Park</b> Full Name (Last, First, Middle Initial) Mailing Address 2660 Woodley Rd NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109669-20000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 28.00 <b>[MEMO ITEM]</b>
<b>B. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address 19th & L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109670-10000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 39.21 <b>[MEMO ITEM]</b>
<b>C. The Kansas City Store</b> Full Name (Last, First, Middle Initial) Mailing Address 1805 Grand Ave City Kansas City State MO Zip Code 64108 Purpose of Disbursement Publication & Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109671-10000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 395.00 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 263 / 963

<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)  
EMILY's List

<b>A. Girard</b> Full Name (Last, First, Middle Initial) Mailing Address 1625 K St, NW Suite 900 City Washington State DC Zip Code 20036 Purpose of Disbursement Publication & Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109671-20000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 132.19 <b>[MEMO ITEM]</b>
<b>B. Chester Library</b> Full Name (Last, First, Middle Initial) Mailing Address 397 Main St City Chester State VT Zip Code 05143 Purpose of Disbursement Publication & Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109671-30000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 2.95 <b>[MEMO ITEM]</b>
<b>C. The New Republic</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 37299 City Boone State IA Zip Code 50037-4299 Purpose of Disbursement Publication & Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109671-40000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 39.97 <b>[MEMO ITEM]</b>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 264 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. US Airways**

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109672-10000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

371.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Logan Airport**

Mailing Address 1 Fish Pier

City Boston State MA Zip Code 02210

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109672-20000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

9.22

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Cinnabon**

Mailing Address National Hall

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109672-30000

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2007

Amount of Each Disbursement this Period

6.07

[MEMO ITEM]

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 265 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Hampton Inn		<b>Transaction ID:</b> SB21B-109672-40000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address 19 New Country Rd		Amount of Each Disbursement this Period <div>94.16</div>
City Thomaston State ME Zip Code 04861	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) National Airport Parking		<b>Transaction ID:</b> SB21B-109672-50000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address Aviation Circle		Amount of Each Disbursement this Period <div>34.00</div>
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Hudson News Logan Airport		<b>Transaction ID:</b> SB21B-109672-60000 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>05 / 10 / 2007</div> </div>
Mailing Address 1 Fish Pier		Amount of Each Disbursement this Period <div>7.48</div>
City Boston State MA Zip Code 02210	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>

# **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 266 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Masala Spices of India**

Mailing Address 314 5th Ave

City San Diego State CA Zip Code 92101

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109672-70000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

52.02

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Embassy Suites**

Mailing Address 601 Pacific Highway

City San Diego State CA Zip Code 92101

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109672-80000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

7.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Cinnabon**

Mailing Address National Hall

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109672-90000

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

6.07

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 267 / 963

<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)  
EMILY's List

<b>A. Ole Madrid</b> Full Name (Last, First, Middle Initial) Mailing Address 751 5th Ave City San Diego State CA Zip Code 92101 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109672-100000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 68.08 <b>[MEMO ITEM]</b>
<b>B. Rain Waters</b> Full Name (Last, First, Middle Initial) Mailing Address 4635 Ruffner St City San Diego State CA Zip Code 92111 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109672-110000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 216.68 <b>[MEMO ITEM]</b>
<b>C. Embassy Suites</b> Full Name (Last, First, Middle Initial) Mailing Address 601 Pacific Highway City San Diego State CA Zip Code 92101 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109672-120000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 5.00 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 268 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Open City**

Mailing Address 2331 Calvert St NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109763-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

235.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Mackeys**

Mailing Address 1823 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109763-20000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

232.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Central Parking System**

Mailing Address 1333 H St., NW #100

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Parking Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109764-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

19.00

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) II Mulino		<b>Transaction ID:</b> SB21B-109765-10000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 4 / 2 0 0 7</div> </div>
Mailing Address 1110 Vermont Avenue NW		Amount of Each Disbursement this Period <div>82.00</div>
City Washington State DC Zip Code 20005	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Open City		<b>Transaction ID:</b> SB21B-109765-20000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 4 / 2 0 0 7</div> </div>
Mailing Address 2331 Calvert St NW		Amount of Each Disbursement this Period <div>20.33</div>
City Washington State DC Zip Code 20008	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Omni Shoreham Hotel		<b>Transaction ID:</b> SB21B-109765-30000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 4 / 2 0 0 7</div> </div>
Mailing Address 2500 Calvert Street NW		Amount of Each Disbursement this Period <div>25.73</div>
City Washington State DC Zip Code 20008	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109765-40000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

744.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. South Houston Limousine**

Mailing Address 3772 Richmond Ave

City Houston State TX Zip Code 77046

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109765-50000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

70.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Amtrak**

Mailing Address 60 Mass Ave NW

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109770-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

275.50

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

<b>A. Murphy's</b> Full Name (Last, First, Middle Initial) Mailing Address 2609 24th St NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-10000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 53.66 <b>[MEMO ITEM]</b>
<b>B. Quiznos</b> Full Name (Last, First, Middle Initial) Mailing Address 990 Elm St City Manchester State NH Zip Code 03101 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-20000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 10.33 <b>[MEMO ITEM]</b>
<b>C. Amtrak</b> Full Name (Last, First, Middle Initial) Mailing Address 60 Mass Ave NW City Washington State DC Zip Code 20002 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-30000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 40.00 <b>[MEMO ITEM]</b>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

<b>A.</b> Starbucks Full Name (Last, First, Middle Initial) Mailing Address 509 Main St City Kennebunkport State ME Zip Code 04072 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-40000 <b>Date of Disbursement</b> <div> <div>05</div> <div>14</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>5.70</div> <b>[MEMO ITEM]</b>
<b>B.</b> Omni Shoreham Hotel Full Name (Last, First, Middle Initial) Mailing Address 2500 Calvert Street NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-50000 <b>Date of Disbursement</b> <div> <div>05</div> <div>14</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>7.85</div> <b>[MEMO ITEM]</b>
<b>C.</b> Omni Shoreham Hotel Full Name (Last, First, Middle Initial) Mailing Address 2500 Calvert Street NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-60000 <b>Date of Disbursement</b> <div> <div>05</div> <div>14</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>34.05</div> <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		



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

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

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Starbucks</b> Full Name (Last, First, Middle Initial) Mailing Address 2660 Woodley Rd NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-70000 <b>Date of Disbursement</b> <div> <div>05</div> <div>14</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>16.73</div> <b>[MEMO ITEM]</b>
<b>B. Marriot</b> Full Name (Last, First, Middle Initial) Mailing Address 2660 Woodley Rd NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-80000 <b>Date of Disbursement</b> <div> <div>05</div> <div>14</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>109.47</div> <b>[MEMO ITEM]</b>
<b>C. BWI Airport</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 8766 City Baltimore State MD Zip Code 21240 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109775-90000 <b>Date of Disbursement</b> <div> <div>05</div> <div>14</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>9.41</div> <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<div></div>

# **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 274 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Manchester Airport**

Mailing Address 1 Airport Rd # 300

City Manchester State NH Zip Code 03103

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109775-100000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

85.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Abes Transportation**

Mailing Address 2500 Calvert St NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109775-110000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

125.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109775-120000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

14.81

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109775-130000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1463.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109775-140000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1674.26

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. UPS Store**

Mailing Address 11 Main St

City Westbrook State ME Zip Code 04092

Purpose of Disbursement  
Deliveries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109775-150000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

8.24

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 276 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109777-20000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

729.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. O'Hare Airport**

Mailing Address 10000 West O'Hare

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109777-30000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

98.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Atlantic Valet**

Mailing Address 1828 L St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Parking Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109780-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

288.00

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 277 / 963

<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)  
EMILY's List

<b>A. Starbucks</b> Full Name (Last, First, Middle Initial) Mailing Address 1734 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109781-10000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 7.26 <b>[MEMO ITEM]</b>
<b>B. Open City</b> Full Name (Last, First, Middle Initial) Mailing Address 2331 Calvert St NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109781-30000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 3.85 <b>[MEMO ITEM]</b>
<b>C. Open City</b> Full Name (Last, First, Middle Initial) Mailing Address 2331 Calvert St NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109781-40000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 54.95 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109781-50000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

11.55

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Open City**

Mailing Address 2331 Calvert St NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109781-60000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

57.83

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Staples**

Mailing Address 19th & L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109782-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

37.40

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 279 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Open City**

Mailing Address 2331 Calvert St NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109783-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

39.23

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109783-20000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

249.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109783-30000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

3.49

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 280 / 963

<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)  
EMILY's List

<b>A. Hotels.com</b> Full Name (Last, First, Middle Initial) Mailing Address 8140 Walnut Hill Lane City Dallas State TX Zip Code 75231 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109787-10000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 526.19 <b>[MEMO ITEM]</b>
<b>B. Southwest Airlines</b> Full Name (Last, First, Middle Initial) Mailing Address 2702 Love Field Drive City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109788-10000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 586.10 <b>[MEMO ITEM]</b>
<b>C. HMS Host Hartsfield</b> Full Name (Last, First, Middle Initial) Mailing Address 6000 N Terminal Pkwy City Atlanta State GA Zip Code 30320 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109788-20000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 6.73 <b>[MEMO ITEM]</b>

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 281 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. CA One Services Oakland**

Mailing Address 1 Airport Drive

City Oakland State CA Zip Code 94621

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109788-30000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

7.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Phoenix Concessions**

Mailing Address Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109788-40000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

17.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109788-50000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

235.88

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 282 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Bay Area Taxi**

Mailing Address 485 36th St

City Oakland State CA Zip Code 94609

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109788-70000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

53.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109793-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

764.83

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Manhattan Market**

Mailing Address 2647 Connecticut Ave NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109793-20000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

11.31

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Miami Intl Airport Parking**

Mailing Address Flamingo Garage Parking

City Miami State FL Zip Code 33299

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109793-30000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Paradies at National Airport**

Mailing Address Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109793-40000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

2.09

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Lidia's Restaurant**

Mailing Address 101 W 22nd St

City Kansas City State MO Zip Code 64108

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109794-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 284 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Enterprise Rent-A-Car**

Mailing Address 600 Grand AV

City Kansas City State MO Zip Code 64106

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109794-20000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

43.73

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. St. Louis Airport Parking**

Mailing Address Lambert-St Louis Intl Airport

City St. Louis State MO Zip Code 63134

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109794-30000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Embassy Suites**

Mailing Address 7640 NW Tiffany Springs Pkwy

City Kansas City State MO Zip Code 64153

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109794-40000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

160.33

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 285 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Office Depot**

Mailing Address 1024 Big Bend Blvd

City Richmond Heights State MO Zip Code 63117

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109794-50000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

17.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109795-10000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Open City**

Mailing Address 2331 Calvert St NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109795-20000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

25.85

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 286 / 963

<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)  
EMILY's List

<b>A. Windsor Inn</b> Full Name (Last, First, Middle Initial) Mailing Address 1842 16th St NW City Washington State DC Zip Code 20009 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109795-30000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 216.41 <b>[MEMO ITEM]</b>
<b>B. Omni Shoreham Hotel</b> Full Name (Last, First, Middle Initial) Mailing Address 2500 Calvert Street NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109795-40000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 797.72 <b>[MEMO ITEM]</b>
<b>C. Open City</b> Full Name (Last, First, Middle Initial) Mailing Address 2331 Calvert St NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> SB21B-109795-50000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 24.53 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 287 / 963

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109796-10000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109797-10000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Au Bon Pain**

Mailing Address 1732 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109799-10000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Barnes and Noble**

Mailing Address 555 12th Street, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109800-10000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

18.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. CVS**

Mailing Address 1025 Connecticut Ave, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109800-20000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

15.57

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Il Mulino**

Mailing Address 1110 Vermont Ave NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109803-10000

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 289 / 963

<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)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Firkin and Fox		<b>Transaction ID:</b> SB21B-109803-20000 <b>Date of Disbursement</b> <div> <div>MM / DD / YYYY</div> <div>05 / 14 / 2007</div> </div>
Mailing Address 45020 Aviation Drive		Amount of Each Disbursement this Period <div>22.79</div>
City Sterling State VA Zip Code 20166	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) C & C Limousines		<b>Transaction ID:</b> SB21B-109803-30000 <b>Date of Disbursement</b> <div> <div>MM / DD / YYYY</div> <div>05 / 14 / 2007</div> </div>
Mailing Address 394 Manly Ct		Amount of Each Disbursement this Period <div>90.05</div>
City Santa Clara State CA Zip Code 95051	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Omni Shoreham Hotel		<b>Transaction ID:</b> SB21B-109803-40000 <b>Date of Disbursement</b> <div> <div>MM / DD / YYYY</div> <div>05 / 14 / 2007</div> </div>
Mailing Address 2500 Calvert Street NW		Amount of Each Disbursement this Period <div>2121.71</div>
City Washington State DC Zip Code 20008	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>

# **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)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 2400 Bayshore Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109811-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

93.13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. The Bridge Conference**

Mailing Address 11709 Bowman Green Drive

City Reston State VA Zip Code 20190

Purpose of Disbursement  
Meeting/Conference

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109812-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

898.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Branders**

Mailing Address 1850 Gateway Dr # 400

City Foster City State CA Zip Code 94404

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-109813-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1463.46

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gallery Watch**

Mailing Address 1011 San Jacinto Blvd

City Austin State TX Zip Code 78701

Purpose of Disbursement  
Publication & Dues

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109814-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

6820.88

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. US Airways**

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109815-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1783.17

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-109815-20000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

329.60

**[MEMO ITEM]**

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. American Airlines**

Mailing Address PO Box 619612

City DFW Airport State TX Zip Code 75261

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109816-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1300.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109817-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

150.81

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Fleet Transportation**

Mailing Address 5703B General Washington

City Alexandria State VA Zip Code 22312

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-109818-10000

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

81450.03

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109916-10000

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

500.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. CVS**

Mailing Address 2616 Connecticut Ave, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Office Supplies Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109916-20000

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

4.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Chipotle**

Mailing Address 2600 Connecticut Ave, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109916-30000

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

5.78

[MEMO ITEM]

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

0.00

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

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

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

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(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109916-40000

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

28.93

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Diamond Cab**

Mailing Address 1100 Q St, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109916-50000

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

28.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Peltown Taxi**

Mailing Address Po Box 117

City Pelham State NY Zip Code 10803

Purpose of Disbursement  
Travel/Accommodation /Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-109916-60000

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

105.00

[MEMO ITEM]

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

0.00

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

613049.39

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A. Hillary Clinton for President Exploratory Committee**

Mailing Address Wanda Will  
201 W Evergreen Ave Apt 704

City Philadelphia State PA Zip Code 19118

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23-109901**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Giffords for Congress**

Mailing Address Rosemary Shiras  
P.O. BOX 11

City Orrs Island State ME Zip Code 04066

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23-109902**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Hillary Clinton for President Exploratory Committee**

Mailing Address Paula Roldan  
1847 26th Road

City Astoria State NY Zip Code 11102

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23-109948**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.00

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

275.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Shea Porter for Congress

Mailing Address Turbi Smilow  
7 Lakeside Dr

City Lee State MA Zip Code 01238

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-109949

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Hillary Clinton for President Exploratory Committee

Mailing Address William Pechilis  
39 Jericho Road

City Weston State MA Zip Code 02493

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-110041

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

**C.** Giffords for Congress

Mailing Address Ruth Benedict  
1257 W Camino De La Oca

City Green Valley State AZ Zip Code 85614

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-110042

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

100.00

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

235.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Carol Shea-Porter Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Judith Tickner 1746 Sunset Avenue City Santa Monica State CA Zip Code 90405 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296612</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Carol Shea-Porter Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Gloria Deison 1311 Peacefield Place City Tallahassee State FL Zip Code 32308 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296613</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Carol Shea-Porter Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Rita Wolz-Sova 2795 Highway 52 City Minooka State IL Zip Code 60447 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296614</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Carol Shea-Porter Contributions**

Mailing Address Kathy Stevens  
83 Academy Road

City North Andover State MA Zip Code 01845

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296615

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Carol Shea-Porter Contributions**

Mailing Address Rosemary Rowan  
666 Upas Street Unit 404

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296616

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Carol Shea-Porter Contributions**

Mailing Address Thomas Hall  
1515 16th Avenue

City San Francisco State CA Zip Code 94122

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296617

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Carol Shea-Porter Contributions**

Mailing Address Julie Lowenberg  
5321 Drane Drive

City Dallas State TX Zip Code 75209

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296618

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Carol Shea-Porter Contributions**

Mailing Address Penelope Taylor  
1643 Seascape Blvd.

City Aptos State CA Zip Code 95003

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Carol Shea-Porter Contributions**

Mailing Address Virginia Lepper  
8255 SW 97th Street

City Miami State FL Zip Code 33156

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296620

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Carol Shea-Porter Contributions**

Mailing Address Maethel Shindelman  
PO Box 370

City Franklin State NC Zip Code 28744

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Carol Shea-Porter Contributions**

Mailing Address Jacqueline Boynton  
3945 N. Harcourt Place

City Milwaukee State WI Zip Code 53211

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Carol Shea-Porter Contributions**

Mailing Address Maureen Gragg  
714 Calatrava Ave.

City Coral Gables State FL Zip Code 33143

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296623

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

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

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

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

FEC Schedule B (Form 3X) Rev. 02/2003

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions		<b>Transaction ID:</b> 5296627 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	3		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	3		2	0	7														
Mailing Address Robert Bridgham PO Box 242		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																						
City Eaton Center	State NH		Zip Code 03832																			
Purpose of Disbursement Candidate Contrib Earmarked			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>[MEMO ITEM]</b> MEMO																			
State: District:																						
<b>B.</b> Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions		<b>Transaction ID:</b> 5296628 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	7		2	0	7														
Mailing Address Marilyn Pizer 115 Stateside Drive		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																						
City Chapel Hill	State NC		Zip Code 27514																			
Purpose of Disbursement Candidate Contrib Earmarked			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>[MEMO ITEM]</b> MEMO																			
State: District:																						
<b>C.</b> Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions		<b>Transaction ID:</b> 5296629 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	4		2	0	7														
Mailing Address Michael Litt 92 Wheatherstone Pl		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																						
City Lake Oswego	State OR		Zip Code 97035																			
Purpose of Disbursement Candidate Contrib Earmarked			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>[MEMO ITEM]</b> MEMO																			
State: District:																						
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																			
0.00																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Carol Shea-Porter Contributions**

Mailing Address Marilyn Wolper  
660 Woodside Drive

City Woodside State CA Zip Code 94062

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296630

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Carol Shea-Porter Contributions**

Mailing Address Barbara Ruskin  
140 Spring Street

City Watertown State MA Zip Code 02472

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296631

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Carol Shea-Porter Contributions**

Mailing Address Ruth Leventhal  
4211 Jonathan Lane

City Harrisburg State PA Zip Code 17110

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296632

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Morrison Mailing Address 80 Lyme Road # 250 City Hanover State NH Zip Code 03755 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID:</b> 5296633 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7 Amount of Each Disbursement this Period 30.00 <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Merryl Weber Mailing Address 5808 Varna Avenue City Van Nuys State CA Zip Code 91401 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID:</b> 5296634 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Alexandra Marshall Mailing Address 30 W. Cedar Street City Boston State MA Zip Code 02108 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID:</b> 5296635 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		



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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Carol Shea-Porter Contributions**

Mailing Address Lark Will  
10003 Deercreek Club Rd E

City Jacksonville State FL Zip Code 32256

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296636

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Carol Shea-Porter Contributions**

Mailing Address Elizabeth Orozco  
910 Lynne Drive

City Waukesha State WI Zip Code 53186

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296637

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Carol Shea-Porter Contributions**

Mailing Address Mary Kenyon  
720 Magnolia Woods Avenue

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296638

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 306 / 963

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Carol Shea-Porter Contributions**

Mailing Address Rosemary Whiting  
14 Brimmer Street

City Boston State MA Zip Code 02108

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296639

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Carol Shea-Porter Contributions**

Mailing Address Ruth Leventhal  
4211 Jonathan Lane

City Harrisburg State PA Zip Code 17110

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296640

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Carol Shea-Porter Contributions**

Mailing Address Mary Delsman  
4487 Picacho Drive

City Riverside State CA Zip Code 92507

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296641

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions		<b>Transaction ID:</b> 5296642 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 0 7</div> </div>
Mailing Address Marsha Bingler 533 Briar Cliff Road		Amount of Each Disbursement this Period <div>100.00</div>
City Pittsburgh State PA Zip Code 15221		
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>[MEMO ITEM]</b> MEMO
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) <b>B.</b> Carol Shea-Porter Contributions		
Mailing Address Becky Kepraios 2106 N Seminary Avenue, #4		
City Chicago State IL Zip Code 60614		<b>Transaction ID:</b> 5296643 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 7</div> </div>
Purpose of Disbursement Candidate Contrib Earmarked		Amount of Each Disbursement this Period <div>50.00</div>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) <b>C.</b> Carol Shea-Porter Contributions		<b>Transaction ID:</b> 5296644 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 0 7</div> </div>
Mailing Address Jane Houck 2351 Nutmeg Terrace		Amount of Each Disbursement this Period <div>100.00</div>
City Baltimore State MD Zip Code 21209		
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>[MEMO ITEM]</b> MEMO
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) <b>SUBTOTAL</b> of Disbursements This Page (optional) .....		
Full Name (Last, First, Middle Initial) <b>TOTAL</b> This Period (last page this line number only) .....		

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Carol Shea-Porter Contributions**

Mailing Address Elizabeth Cox  
142 W. Calle Manantial Kent

City Green Valley State AZ Zip Code 85614

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296645

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Carol Shea-Porter Contributions**

Mailing Address Helen O'Mara  
5709 8th Avenue

City Sacramento State CA Zip Code 95820

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296646

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Carol Shea-Porter Contributions**

Mailing Address Lucy Cooper  
202 Seeley Street Apt. 5A

City Brooklyn State NY Zip Code 11218

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296647

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Joan Glatthorn 6331 Camino de la Costa City La Jolla State CA Zip Code 92037 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID:</b> 5296648 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Chella Periyanyagam 200 Lakeside Court City Hanson State KY Zip Code 42413 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID:</b> 5296649 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 10.00 <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Paula Cooper 465 West 23rd Street City New York State NY Zip Code 10011 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID:</b> 5296650 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Carol Shea-Porter Contributions**

Mailing Address Caroline Arms  
166 Duke Of Gloucester Street

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296651

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Carol Shea-Porter Contributions**

Mailing Address Kirstie Bellman  
1941 Marview Drive

City Thousand Okas State CA Zip Code 91362

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296652

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Carol Shea-Porter Contributions**

Mailing Address Robert Grubbs  
1700 Spruce Street

City S. Pasadena State CA Zip Code 91030

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296653

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Carol Shea-Porter Contributions</b> Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Joy Silver 1059 W Skylark Drive City Palatine State IL Zip Code 60067 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296654</b> Date of Disbursement 05 / 10 / 2007 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Gabby Giffords Contributions</b> Full Name (Last, First, Middle Initial) Janet Minonne Mailing Address 884 Marlesta Road City Pinole State CA Zip Code 94564 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296655</b> Date of Disbursement 05 / 17 / 2007 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Gabby Giffords Contributions</b> Full Name (Last, First, Middle Initial) Paul Chapin Mailing Address 829 Gonzales Road City Santa Fe State NM Zip Code 87501 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296656</b> Date of Disbursement 05 / 17 / 2007 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Karen Shumpert  
171 Ridge Road

City West Milford State NJ Zip Code 07480

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296657

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Jon Asmundson  
1324 La Pointe Road

City Eureka State CA Zip Code 95503

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296658

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Maureen Gragg  
714 Calatrava Ave.

City Coral Gables State FL Zip Code 33143

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Michael Litt  
92 Wheatherstone Pl

City Lake Oswego State OR Zip Code 97035

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296660

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Jane Houck  
2351 Nutmeg Terrace

City Baltimore State MD Zip Code 21209

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296661

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Rita Wolz-Sova  
2795 Highway 52

City Minooka State IL Zip Code 60447

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296662

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Beth Gilbert  
2929 Stanford Avenue

City Dallas State TX Zip Code 75225

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296663

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Stephanie Lurz  
909 Cromwell Bridge Rd

City Baltimore State MD Zip Code 21286

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296664

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Caroline Arms  
166 Duke Of Gloucester Street

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296665

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Marilyn Wolper  
660 Woodside Drive

City Woodside State CA Zip Code 94062

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Roberta Lazar  
219 E. 69th Street, Apt. 8K

City New York State NY Zip Code 10021

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296667

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Kathleen Harrick  
620 Via Mezner Apt 1102

City Naples State FL Zip Code 34108

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296668

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Alice Davis  
215 W. 14th Street

City Wilmington State DE Zip Code 19801

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296669

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Mary Brucklacher  
560 Deer Lake Dr

City Findlay State OH Zip Code 45840

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296670

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Kenneth Bugbee  
1455 E McLean Ave

City Burton State MI Zip Code 48529

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296671

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Chella Periyanyagam  
200 Lakeside Court

City Hanson State KY Zip Code 42413

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296672

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Sandra Bruns  
1111 Leavenworth

City Omaha State NE Zip Code 68102

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296673

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Elizabeth Cox  
142 W. Calle Manantial Kent

City Green Valley State AZ Zip Code 85614

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296674

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Robert Grubbs  
1700 Spruce Street

City S. Pasadena State CA Zip Code 91030

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296675

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Lucy Cooper  
202 Seeley Street Apt. 5A

City Brooklyn State NY Zip Code 11218

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296676

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Kirstie Bellman  
1941 Marview Drive

City Thousand Okas State CA Zip Code 91362

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296677

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Helen O'Mara  
5709 8th Avenue

City Sacramento State CA Zip Code 95820

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296678

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Joy Silver  
1059 W Skylark Drive

City Palatine State IL Zip Code 60067

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296679

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Mary Courrage  
1905 Princess Street

City Wilmington State NC Zip Code 28405

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296680

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Barbara Ruskin  
140 Spring Street

City Watertown State MA Zip Code 02472

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296681

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Joan Glatthorn  
6331 Camino de la Costa

City La Jolla State CA Zip Code 92037

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296682

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Marilyn Pizer  
115 Stateside Drive

City Chapel Hill State NC Zip Code 27514

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296683

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 321 / 963

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Becky Kepraio  
2106 N Seminary Avenue, #4

City Chicago State IL Zip Code 60614

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296684

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Merryl Weber  
5808 Varna Avenue

City Van Nuys State CA Zip Code 91401

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296685

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Mary Little  
PO Box 991

City Glen Ellen State CA Zip Code 95442

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296686

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 322 / 963

<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Paula Cooper  
465 West 23rd Street

City New York State NY Zip Code 10011

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296687

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Marsha Bingler  
533 Briar Cliff Road

City Pittsburgh State PA Zip Code 15221

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296688

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Tammy McLeod  
5428 E. Sanna Street

City Paradise Valley State AZ Zip Code 85253

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296689

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Lark Will  
10003 Deercreek Club Rd E

City Jacksonville State FL Zip Code 32256

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296690

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Rosemary Rowan  
666 Upas Street Unit 404

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296691

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Beverly Johnson  
683 N. Kalaheo

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296692

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Olivia Tartakow  
18 Elgin Lane

City State Zip Code  
Palm Beach Gardens FL 33418

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296693

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Carol Lassen  
80 Locust Street

City State Zip Code  
Denver CO 80220

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296694

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Ruth Hailperin  
175 W. North Street, Apt. 234C

City State Zip Code  
Nazaret PA 18064

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296695

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Judith Tickner  
1746 Sunset Avenue

City Santa Monica State CA Zip Code 90405

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296696

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Gabby Giffords Contributions**

Mailing Address Muriel Asbornsen  
PO Box 26

City Stuyvesant State NY Zip Code 12173

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296697

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

200.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Gabby Giffords Contributions**

Mailing Address Jacqueline Boynton  
3945 N. Harcourt Place

City Milwaukee State WI Zip Code 53211

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296698

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Gabby Giffords Contributions**

Mailing Address Mary Kenyon  
720 Magnolia Woods Avenue

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296699

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

30.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Molly O'Rourke  
1724 Connecticut Ave NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296700

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Tamara Collins  
3666 W Scribner Lane

City Inglewood State CA Zip Code 90305

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296701

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Karen Shumpert  
171 Ridge Road

City West Milford State NJ Zip Code 07480

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296702

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Norma Stone  
3601 Turtle Creek Blvd. #404

City Dallas State TX Zip Code 75219

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296703

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Judith Thompson  
3427 Black Willow Trail

City DeLand State FL Zip Code 32724

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296704

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

2300.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Jean Miller  
PO Box 349

City Arlington State VT Zip Code 05250

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296705

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Mary Mycek  
34 Laurel Ave.

City Derby State CT Zip Code 06418

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296706

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Shannon OConnell  
3303 McFarland Road

City Tampa State FL Zip Code 33618

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296707

Date of Disbursement

05 / 19 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Michelle Minero  
320 Western Avenue

City Petaluma State CA Zip Code 94952

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296708

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Stephanie Lurz  
909 Cromwell Bridge Rd

City Baltimore State MD Zip Code 21286

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296709

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Ellen Widoff  
1108 Oak Knoll Terrace

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296710

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Adam Goers  
1700 Q Street

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296711

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Amie Kershner  
3114 E. Baltimore St.

City Baltimore State MD Zip Code 21224

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296712

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Heather Colburn  
1320 Rutledge St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296713

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**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)  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Jared Davis  
103 S. Spruce St.

City Hammond State LA Zip Code 70403

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296714

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Anice Schervish  
1314 Irving St., NW

City Washington State DC Zip Code 20010

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296715

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Amy Yates  
88 Greenwich St. #425

City New York State NY Zip Code 10006

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296716

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Karli Penders  
850 North Randolph Street

City Arlington State VA Zip Code 22203

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296717

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Michael Griffith  
308 N Edgewood

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296718

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Beth Gilbert  
2929 Stanford Avenue

City Dallas State TX Zip Code 75225

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296719

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Karin Johanson  
3100 Connecticut Avenue #345

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296720

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Sadie Dingfelder  
1660 Lanier # 317

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296721

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Roslyn Halpern  
7546 SW Aloma Way

City Portland State OR Zip Code 97223

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296722

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Penelope Taylor  
1643 Seascape Blvd.

City Aptos State CA Zip Code 95003

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296723

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Halcyon Mathis  
3141 Martha Custis Dr

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296724

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Kimberley Salter  
31462 Flying Cloud Drive

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296725

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**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  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Sheila O'Connell  
9408 Thornhill Road

City Silver Spring State MD Zip Code 20901

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296726

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Rosemarie Day  
33 Grant Street

City Somerville State MA Zip Code 02145

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296727

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Gloria Deison  
1311 Peacefield Place

City Tallahassee State FL Zip Code 32308

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296728

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Robert Grubbs  
1700 Spruce Street

City S. Pasadena State CA Zip Code 91030

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296729

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Sarah Kilpatrick  
1101 S State St Apt

City Chicago State IL Zip Code 60605

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296730

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Ashlee Tran  
909 North Carolina SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296731

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Diane McMahon  
2735 North 11th Street

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296732

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Ellen Dunbar  
917 Princeton Ave

City Modesto State CA Zip Code 95350

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296733

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Holly Williams  
2494 Brookdale Drive NE

City Atlanta State GA Zip Code 30345

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296734

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Lee Zahnow  
3732 Windom Place NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296735

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Jennifer Peters  
3895 Rodman Street, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296736

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Jennifer Peters  
3895 Rodman Street, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Erin Stuckey  
2450 Ontario Rd NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296738

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Diane Feldman  
1608 Webster Street NW

City Washington State DC Zip Code 20011

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296739

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

200.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Martha McKenna  
913 S Decker Avenue

City Baltimore State MD Zip Code 21224

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296740

Date of Disbursement

05 / 20 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Julia Harper  
156 Cedar Ave.

City Arlington State MA Zip Code 02476

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296741

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Allison Mitchell  
2420 16th Street, NW # 606

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296742

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Britt Cocanour  
6606 Allegheny Ave

City Takoma Park State MD Zip Code 20912

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296743

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Lucy Melcher  
2401 Calvert Street NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296744

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Marilyn Wolper  
660 Woodside Drive

City Woodside State CA Zip Code 94062

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296745

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Caroline Fines  
10621 Regent Park Court

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296746

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Joan Wich  
3122 Ferndale Street

City Houston State TX Zip Code 77098

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296747

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4600.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Ellen Moran  
3106 Cummings Lane

City Chevy Chase State MD Zip Code 20815

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296748

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Roberta Lazar  
219 E. 69th Street, Apt. 8K

City New York State NY Zip Code 10021

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296749

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Carolyn Hansen  
1551 Valencia Road

City Schenectady State NY Zip Code 12309

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296750

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Joyce Benjamins  
1310 S. Oxford Road

City Grosse Pointe State MI Zip Code 48236

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296751

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Suzanne Davis  
6300 Sharon Hills Road

City Charlotte State NC Zip Code 28210

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296752

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Lorraine Barnhart  
P.O. Box 382

City State Zip Code  
Great Falls VA 22066

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296753

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Marion Covell  
P.O. Box 165

City State Zip Code  
Babylon NY 11702

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296754

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Rebecca Webber  
216 12th Street SE #B

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296755

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Rebecca Webber  
216 12th Street SE #B

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296756

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

5.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address William Robinson  
1506 30th Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296757

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Steph Ridder  
1490 North Poes Rd.

City Flint Hill State VA Zip Code 22627

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296758

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

920.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address Nick Goldberg 1300 Army Navy Drive # 1019 City Arlington State VA Zip Code 22202 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 5296759 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7 Amount of Each Disbursement this Period 20.00 <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address Harlan Larson 10605 297th Avenue City Princeton State MN Zip Code 55371 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 5296760 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address Susan Spencer Jupiter Yacht Club, Apt 502 City Jupiter State FL Zip Code 33477 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 5296761 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Steph Ridder  
1490 North Poes Rd.

City Flint Hill State VA Zip Code 22627

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296762

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

80.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Greta Houston  
5560 Germantown Road

City Midland State VA Zip Code 22728

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296763

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Maren Hesla  
5515 Little Falls Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296764

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

80.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Mary Jane Volk  
541 E Nelson Ave

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296765

Date of Disbursement

/   /

Amount of Each Disbursement this Period

160.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Mary Jane Volk  
541 E Nelson Ave

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296766

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Chella Periyannayagam  
200 Lakeside Court

City Hanson State KY Zip Code 42413

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296767

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Katherine Goktepe  
1439 McLean Mews Ct

City McLean State VA Zip Code 22101

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296768

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Enid Gottesman  
530 Ocean Blvd.

City Golden Beach State FL Zip Code 33160

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296769

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Rebecca Bahar-Cook  
525 Westmoreland

City Lansing State MI Zip Code 48915

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296770

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Kathleen Brueger  
5217 Yorktown Blvd

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296771

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Gertrude Meyers  
1240 Colonial Drive

City Baton Rouge State LA Zip Code 70806

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296772

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Janet Blaustein  
337 Cambridge Drive

City Ramsey State NJ Zip Code 07446

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296773

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**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

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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Kathleen Brueger  
5217 Yorktown Blvd

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296774

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Diana Strassmann  
5211 Briar Drive

City Houston State TX Zip Code 77056

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296775

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Maryann Cuddeback  
4934 E. Timrod St.

City Tucson State AZ Zip Code 85711

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296776

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
 EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Cheryl Wojciechowski  
 4817 36th Street NW # 511

City Washington State DC Zip Code 20008

Purpose of Disbursement  
 Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296777

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
 MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Susan Markham  
 1402 emerson street nw

City Washington State DC Zip Code 20011

Purpose of Disbursement  
 Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296778

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
 MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Tiffany Brown  
 4544 Pimlico Place

City Okemos State MI Zip Code 48864

Purpose of Disbursement  
 Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296779

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
 MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Sylvia Olivetti  
1917 Locust Grove Road

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296780

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Constance Hickey  
11905 Jubal Early Court

City Potomac State MD Zip Code 20854

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296781

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Jennifer Brown  
4530 Broad Branch Rd NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296782

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**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  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Jennifer Brown  
4530 Broad Branch Rd NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296783

Date of Disbursement

05 / 18 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Sylvia Olivetti  
1917 Locust Grove Road

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296784

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Louise Sause  
450 Burgundy Sq Apt 201

City East Lansing State MI Zip Code 48823

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296785

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Mary Delsman  
4487 Picacho Drive

City Riverside State CA Zip Code 92507

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296786

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Anita Dunn  
4413 Stanford St.

City Chevy Chase State MD Zip Code 20815

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296787

Date of Disbursement

/   /

Amount of Each Disbursement this Period

199.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Karen Moore  
601 Eagles Wing Ct.

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296788

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Karen Moore  
601 Eagles Wing Ct.

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296789

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Roberta Lake  
605 E Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296790

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Eileen Harrington  
616 E Street, NW # 212

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296791

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Lorraine McCrary  
4411 Ripley

City Davenport State IA Zip Code 52806

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296792

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Kathleen Harrick  
620 Via Mezner Apt 1102

City Naples State FL Zip Code 34108

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296793

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Eva Landy  
1 Nayatt Rd

City Barrington State RI Zip Code 02806

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296794

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Maethel Shindelman  
PO Box 370

City Franklin State NC Zip Code 28744

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296795

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Lisa Robillard  
4326 South 36th Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296796

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Ellen Kemp  
184 Clover Lane

City Princeton State NJ Zip Code 08540

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296797

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**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)  
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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		<b>Transaction ID:</b> 5296798 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 3 / 2 0 0 7</div> </div>
Mailing Address Joan Glatthorn 6331 Camino de la Costa		Amount of Each Disbursement this Period <div>1000.00</div>
City La Jolla State CA Zip Code 92037		
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>[MEMO ITEM]</b> MEMO
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		<b>Transaction ID:</b> 5296799 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 0 / 2 0 0 7</div> </div>
Mailing Address Craig Auster 65 Highview Drive		Amount of Each Disbursement this Period <div>60.00</div>
City Carmel State NY Zip Code 10512		
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>[MEMO ITEM]</b> MEMO
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		<b>Transaction ID:</b> 5296800 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 0 / 2 0 0 7</div> </div>
Mailing Address Edna Morris 14 North Pine Circle		Amount of Each Disbursement this Period <div>2300.00</div>
City Belleair State FL Zip Code 33756		
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>[MEMO ITEM]</b> MEMO
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<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)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Margaret Henney  
4212 Queensbury Road

City Hyattsville State MD Zip Code 20781

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296801

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Margaret Henney  
4212 Queensbury Road

City Hyattsville State MD Zip Code 20781

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296802

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Stacie Temple  
182 Martin Lane

City Alexandria State VA Zip Code 22304

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296803

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**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  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Margaret Henney  
4212 Queensbury Road

City Hyattsville State MD Zip Code 20781

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296804

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Britt Cocanour  
6606 Allegheny Ave

City Takoma Park State MD Zip Code 20912

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296805

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Ruth Leventhal  
4211 Jonathan Lane

City Harrisburg State PA Zip Code 17110

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296806

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Rosemary Reed  
1815 18th Street NW # 500

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296807

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Tiffany Reed  
2450 Ontario Rd NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296808

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Rosemary Rowan  
666 Upas Street Unit 404

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296809

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Cheryln Townsend  
674 Cervantes Drive

City Henderson State NV Zip Code 89014

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296810

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Ruth Leventhal  
4211 Jonathan Lane

City Harrisburg State PA Zip Code 17110

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296811

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Olivia Tartakow  
18 Elgin Lane

City Palm Beach Gardens State FL Zip Code 33418

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296812

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Beverly Johnson  
683 N. Kalaheo

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296813

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Bess Freedlander  
14 Glen Avenue

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296814

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

60.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Lark Will  
10003 Deercreek Club Rd E

City Jacksonville State FL Zip Code 32256

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296815

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Laura Fruge  
420 Oklahoma Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296816

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

30.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Laura Fruge  
420 Oklahoma Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296817

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

20.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Beth Davidson  
407 N. Midland Ave

City Nyack State NY Zip Code 10960

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296818

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Stephanie Covington  
407 7th Street

City Del Mar State CA Zip Code 92014

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296819

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Tanya Bjork  
2805 Dewey Court

City Middleton State WI Zip Code 53562

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296820

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Mary Kenyon  
720 Magnolia Woods Avenue

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296821

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

Full Name (Last, First, Middle Initial)

## **A. Hillary Clinton Contributions**

Mailing Address Judith Maynes  
13621 Dearing Bay Drive

City Carol Gables State FL Zip Code 33158

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **B. Hillary Clinton Contributions**

Mailing Address Eillen Malcolm  
1120 Connecticut Ave., N.W.

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

## **C. Hillary Clinton Contributions**

Mailing Address Margaret Fenley  
105 Cartwright Drive

City Springfield State IL Zip Code 62704

Purpose of Disbursement  
Candidate Contrib Earmarked

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 5296824

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Leila Marquis 13555 Coliseum Drive, Apt. B City Chesterfield State MO Zip Code 63017 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296825</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Ellen Eagan 344 Santa Paula Avenue City Millbrae State CA Zip Code 94030 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296826</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 200.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Robert Grubbs 1700 Spruce Street City S. Pasadena State CA Zip Code 91030 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296827</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Jon Asmundson 1324 La Pointe Road City Eureka State CA Zip Code 95503 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296828</b> Date of Disbursement 05 / 10 / 2007 Amount of Each Disbursement this Period 250.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Muriel Asbornsen PO Box 26 City Stuyvesant State NY Zip Code 12173 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296829</b> Date of Disbursement 05 / 10 / 2007 Amount of Each Disbursement this Period 200.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Michael Litt 92 Wheatherstone Pl City Lake Oswego State OR Zip Code 97035 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296830</b> Date of Disbursement 05 / 14 / 2007 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Elizabeth Orozco 910 Lynne Drive City Waukesha State WI Zip Code 53186 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296831</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Stephanie Lurz 909 Cromwell Bridge Rd City Baltimore State MD Zip Code 21286 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296832</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7 Amount of Each Disbursement this Period 10.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Mary Kenyon 720 Magnolia Woods Avenue City Baton Rouge State LA Zip Code 70808 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296833</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 30.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address <b>Maureen Gragg</b> <b>714 Calatrava Ave.</b> City <b>Coral Gables</b> State <b>FL</b> Zip Code <b>33143</b> Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296834</b> Date of Disbursement <div> <div>05</div> <div>05</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>50.00</div> <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address <b>Beverly Johnson</b> <b>683 N. Kalaheo</b> City <b>Kailua</b> State <b>HI</b> Zip Code <b>96734</b> Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296835</b> Date of Disbursement <div> <div>05</div> <div>02</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>100.00</div> <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address <b>Rosemary Rowan</b> <b>666 Upas Street Unit 404</b> City <b>San Diego</b> State <b>CA</b> Zip Code <b>92103</b> Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296836</b> Date of Disbursement <div> <div>05</div> <div>10</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>50.00</div> <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Marilyn Wolper 660 Woodside Drive City Woodside State CA Zip Code 94062 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296837</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Carolyn Hansen 1551 Valencia Road City Schenectady State NY Zip Code 12309 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296838</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Joyce Benjamins 1310 S. Oxford Road City Grosse Pointe State MI Zip Code 48236 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296839</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Carol Barnett 10245 Collins Avenue # 12E City Bal Harbour State FL Zip Code 33154 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296840</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 5.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Joan Glatthorn 6331 Camino de la Costa City La Jolla State CA Zip Code 92037 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296841</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Roberta Lazar 219 E. 69th Street, Apt. 8K City New York State NY Zip Code 10021 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296842</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Alice Davis 215 W. 14th Street City Wilmington State DE Zip Code 19801 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296843</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Helen O'Mara 5709 8th Avenue City Sacramento State CA Zip Code 95820 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296844</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Gertrude Meyers 1240 Colonial Drive City Baton Rouge State LA Zip Code 70806 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296845</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 Amount of Each Disbursement this Period 30.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input 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)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Mary Hughes 201 Harrison City San Francisco State CA Zip Code 94105 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296846</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Julie Lowenberg 5321 Drane Drive City Dallas State TX Zip Code 75209 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296847</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Chella Periyannayagam 200 Lakeside Court City Hanson State KY Zip Code 42413 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296848</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 10.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Lark Will 10003 Deercreek Club Rd E City Jacksonville State FL Zip Code 32256 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296849</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Paula Cooper 465 West 23rd Street City New York State NY Zip Code 10011 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296850</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Louise Sause 450 Burgundy Sq Apt 201 City East Lansing State MI Zip Code 48823 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: 5296851</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Ellen Kemp 184 Clover Lane City Princeton State NJ Zip Code 08540 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296852</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>B. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Al Erdi 4311 Farmfield Court City Baldwin State MD Zip Code 21013 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296853</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b> MEMO
<b>C. Kirsten Gillibrand Contributions</b> Full Name (Last, First, Middle Initial) Mailing Address Jacqueline Boynton 3945 N. Harcourt Place City Milwaukee State WI Zip Code 53211 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 5296854</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		0.00
<b>TOTAL</b> This Period (last page this line number only) .....		510.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ellyn Collins		<b>Transaction ID:</b> SB28A-109550 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 7</div> </div>
Mailing Address 491 Harvard Drive		<b>Amount of Each Disbursement this Period</b> <div>25.00</div>
City Arcadia State CA Zip Code 91007		
Purpose of Disbursement Refund	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Caroline Cox		<b>Transaction ID:</b> SB28A-109551 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 7</div> </div>
Mailing Address 620 Sand Hill Road Apt. 419D		<b>Amount of Each Disbursement this Period</b> <div>200.00</div>
City Palo Alto State CA Zip Code 94030		
Purpose of Disbursement Refund	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Norma Davis		<b>Transaction ID:</b> SB28A-109552 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 7</div> </div>
Mailing Address 1308 Lasuen Drive		<b>Amount of Each Disbursement this Period</b> <div>100.00</div>
City Millbrae State CA Zip Code 94030		
Purpose of Disbursement Refund	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>325.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Elizabeth Dolan		<b>Transaction ID:</b> SB28A-109553 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 7</div> </div>
Mailing Address 7 Monroe Street		<b>Amount of Each Disbursement this Period</b> <div>100.00</div>
City Dover State NH Zip Code 03820		
Purpose of Disbursement Refund	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Anneliese Garver		<b>Transaction ID:</b> SB28A-109554 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 7</div> </div>
Mailing Address 11253 Boston Valley Road		<b>Amount of Each Disbursement this Period</b> <div>25.00</div>
City East Concord State NY Zip Code 14055		
Purpose of Disbursement Refund	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Catherine Hill		<b>Transaction ID:</b> SB28A-109555 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 7</div> </div>
Mailing Address 425 Pennington Lane		<b>Amount of Each Disbursement this Period</b> <div>80.00</div>
City Louisville State KY Zip Code 40207		
Purpose of Disbursement Refund	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

205.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
 EMILY's List

<b>A. Marilyn Halprin</b> Full Name (Last, First, Middle Initial) Mailing Address 56 Lemon Road City Farmingdale State NJ Zip Code 07727 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB28A-109556</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 50.00
<b>B. Frances Johnson</b> Full Name (Last, First, Middle Initial) Mailing Address 1501 Delmont Court City Urbana State IL Zip Code 61801 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB28A-109557</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 25.00
<b>C. Jenay Katkowsky</b> Full Name (Last, First, Middle Initial) Mailing Address 11620 Alba City Ben Lomand State CA Zip Code 95005 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB28A-109558</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 50.00
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		125.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Carey Patrick		<b>Transaction ID:</b> SB28A-109559 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	7													
Mailing Address 4503 Cambridge Ct		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																						
City Sugar Land	State TX		Zip Code 77479																			
Purpose of Disbursement Refund			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Isabelle Schmid		<b>Transaction ID:</b> SB28A-109560 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	7													
Mailing Address 909 W Foster Ave St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																						
City Chicago	State IL		Zip Code 60640																			
Purpose of Disbursement Refund			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Melanie Terrill		<b>Transaction ID:</b> SB28A-109561 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	7													
Mailing Address 450 S. 8th Street		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																						
City Salina	State KS		Zip Code 67401																			
Purpose of Disbursement Refund			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 382 / 963

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Josephine Turner		<b>Transaction ID:</b> SB28A-109562 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	7													
Mailing Address 849 Daffodil Drive		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">45.00</td> </tr> </table>	45.00																			
45.00																						
City Riverside	State CA		Zip Code 92507																			
Purpose of Disbursement Refund			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Shirley Winer		<b>Transaction ID:</b> SB28A-109563 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	7													
Mailing Address 139 Kinnebrook Road		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">175.00</td> </tr> </table>	175.00																			
175.00																						
City Huntington	State MA		Zip Code 01050																			
Purpose of Disbursement Refund			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Ruth Heden		<b>Transaction ID:</b> SB28A-109564 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	7													
Mailing Address 11 Sunset Circle		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																						
City Milford	State NH		Zip Code 03055																			
Purpose of Disbursement Refund			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td colspan="10">320.00</td> </tr> </table>	320.00																			
320.00																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 383 / 963

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Jennifer Anderson		<b>Transaction ID:</b> SB28A-109548 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>0</td><td>2</td><td></td> <td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	7													
Mailing Address 1963 Clemens Road		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																						
City Oakland State CA Zip Code 94602																						
Purpose of Disbursement Refund	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Edythe Conlon		<b>Transaction ID:</b> SB28A-109549 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>0</td><td>2</td><td></td> <td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	7													
Mailing Address 198 Kates Path		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00																			
50.00																						
City Yarmouth State MA Zip Code 02675																						
Purpose of Disbursement Refund	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Dennis Trovato		<b>Transaction ID:</b> SB28A-109616 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td> <td>0</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	3		2	0	0	7													
Mailing Address 16814 140th Ave NE		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>35.00</td> </tr> </table>	35.00																			
35.00																						
City Woodinville State WA Zip Code 98072																						
Purpose of Disbursement Refund	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

**SUBTOTAL** of Disbursements This Page (optional) .....

185.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 384 / 963

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) June Roberts		<b>Transaction ID:</b> SB28A-110215 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	8		2	0	0	7													
Mailing Address 20 Charleseton Court		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																						
City Charleston State SC Zip Code 29401																						
Purpose of Disbursement Refund																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Karin Cordry		<b>Transaction ID:</b> SB28A-109947 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	2		2	0	0	7													
Mailing Address 430 Altair Place		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00																			
25.00																						
City Venice State CA Zip Code 90291																						
Purpose of Disbursement Refund																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Sara Beach		<b>Transaction ID:</b> SB28A-110213 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	5		2	0	0	7													
Mailing Address 1686 St. James Court		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																						
City Columbus State OH Zip Code 43220																						
Purpose of Disbursement Refund																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

**SUBTOTAL** of Disbursements This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 385 / 963

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Rhoda Martyn		<b>Transaction ID:</b> SB28A-110214 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 0 7</div> </div>	
Mailing Address 620 Sand Hill Rd #404G		<b>Amount of Each Disbursement this Period</b> <div>250.00</div>	
City	State		Zip Code
Palo Alto	CA		94304
Purpose of Disbursement			<div>Category/Type</div>
Refund			
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		
<b>B.</b> Full Name (Last, First, Middle Initial) Frances Weaver		<b>Transaction ID:</b> SB28A-110217 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 0 7</div> </div>	
Mailing Address 750 Weaver Dairy Road #166		<b>Amount of Each Disbursement this Period</b> <div>25.00</div>	
City	State		Zip Code
Chapel Hill	NC		27514
Purpose of Disbursement			<div>Category/Type</div>
Refund			
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		
<b>C.</b> Full Name (Last, First, Middle Initial) Nelda Spencer		<b>Transaction ID:</b> SB28A-110216 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 7</div> </div>	
Mailing Address 11166 Beaton Ct		<b>Amount of Each Disbursement this Period</b> <div>100.00</div>	
City	State		Zip Code
San Diego	CA		92126
Purpose of Disbursement			<div>Category/Type</div>
Refund			
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

**SUBTOTAL** of Disbursements This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

1870.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 386 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Louisa Abney-Babcock Mailing Address 1607 Gravel Pike City State Zip Code Perkiomenville PA 18074 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243715</b> Amount of Each Receipt this Period 250.00
Name of Employer Souderton Area School District Occupation Educator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Victoria B. Abrams Mailing Address 17 Tanglewood Drive City State Zip Code Concord MA 01742 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245136</b> Amount of Each Receipt this Period 100.00
Name of Employer self Occupation health care consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Frances D. Ackerly Mailing Address 26 Parker Street City State Zip Code Cambridge MA 02138 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2244024</b> Amount of Each Receipt this Period 200.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 387 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Bonnie Ackley

Mailing Address 907 Berkshire Road

City State Zip Code  
 Ann Arbor MI 48104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247569

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Sandra J. Adams

Mailing Address 1863 San Ramon Avenue

City State Zip Code  
 Berkeley CA 94707

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244273

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Lizbeth Adams

Mailing Address 19 Hobart Road

City State Zip Code  
 Summit NJ 07901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248210

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 388 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Katy Adams

Mailing Address 2821 Fairmount Blvd

City State Zip Code  
 Cleveland Hts OH 44118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
George Mason University

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251163

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Susan S. Addiss

Mailing Address 8 Spring Road

City State Zip Code  
 Branford CT 06405

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Public Health Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2244014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Susan Adin

Mailing Address 10571 Stonebridge Boulevard

City State Zip Code  
 Boca Raton FL 33498

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247930

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

265.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Susan S Adler		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 161 E Chicago Ave Apt 35E		<b>Transaction ID:</b> 2246443	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Wilton J. Aebersold		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address PO Box 1244		<b>Transaction ID:</b> 2250999	
City New Albany	State IN	Zip Code 47151	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation mail order		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Polly H. Agee		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 2818 N. Nottingham Street		<b>Transaction ID:</b> 2242822	
City Arlington	State VA	Zip Code 22207	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Agee & Company	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Florence Ellison Ailes Mailing Address 1191 Needle Point Drive City State Zip Code Cheboygan MI 49721 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 725.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249140</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Florence Ellison Ailes Mailing Address 1191 Needle Point Drive City State Zip Code Cheboygan MI 49721 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 725.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251877</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Suzanne G. Aisenberg Mailing Address 45 E. 85th Street, # 8D City State Zip Code New York NY 10028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation The Atlantic Philanthropies Program Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241841</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Phyllis M Albritton			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 27567 Mountain Park Road			<b>Transaction ID:</b> 2243237	
City State Zip Code Evergreen CO 80439			Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Delta Dental		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn K. Alimpich			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 335 Hartsough Avenue			<b>Transaction ID:</b> 2247049	
City State Zip Code Plymouth MI 48170			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Social Security Administra- tion		Occupation Social/Insurance Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Joanna Alling			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 51 Drumlin Road			<b>Transaction ID:</b> 2246908	
City State Zip Code Westport CT 06880			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Psychotherapist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**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 392 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Susan W. Almy			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 266 Poverty Lane, # 4B			<b>Transaction ID:</b> 2244883	
City State Zip Code Lebanon NH 03766			Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Debra E. Alpert			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 5807 W. 77th Pl.			<b>Transaction ID:</b> 2248026	
City State Zip Code Los Angeles CA 90045			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Dorothy C. Amato			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 22149 Kensington Street			<b>Transaction ID:</b> 2248235	
City State Zip Code Taylor MI 48180			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation 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) .....

2850.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Virginia M. Anderson, M.D. Mailing Address 10 Warren Street City State Zip Code Rumson NJ 07760 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation NYC & NYS Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>250.00</div>			Date of Receipt <div>05 / 25 / 2007</div> <b>Transaction ID: 2250677</b> Amount of Each Receipt this Period <div>250.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sara Anderson Mailing Address 100 South Street, Apt. 104 City State Zip Code Sausalito CA 94965 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>250.00</div>			Date of Receipt <div>05 / 08 / 2007</div> <b>Transaction ID: 2243251</b> Amount of Each Receipt this Period <div>250.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Julia F. Anderson Mailing Address 2424 Hamilton Drive City State Zip Code Ames IA 50014 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>250.00</div>			Date of Receipt <div>05 / 15 / 2007</div> <b>Transaction ID: 2244813</b> Amount of Each Receipt this Period <div>250.00</div>
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			<div>750.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			<div></div>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Glenda Anderson Mailing Address 3065 Bilbo Dr City San Jose State CA Zip Code 95121 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Management advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244831</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Lillie Leonard Anderson Mailing Address 355 Willow Avenue City Corte Madera State CA Zip Code 94925 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241911</b> Amount of Each Receipt this Period 200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Irene Anderson Mailing Address 8715 Starcrest Drive, Apt. 10 City San Antonio State TX Zip Code 78217 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242482</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

950.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Barbara K. Andreas  
Mailing Address 1366 Mockingbird Drive

City State Zip Code  
Kent OH 44240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community College

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245532

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Jean E. Andres  
Mailing Address 1003 N. 21st Street

City State Zip Code  
Lafayette IN 47904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251859

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Leslie Andrews  
Mailing Address 905 3rd Street

City State Zip Code  
Santa Cruz CA 95060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241348

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Carol Antle Mailing Address 2837 Melillo Drive City Walnut Creek State CA Zip Code 94597 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241784</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Roberta Geidner Antoniotti Mailing Address 3006 Benson Mill Road City Upperco State MD Zip Code 21155 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer RGA Consulting Services Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247292</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Janet Teresa Arey Mailing Address 5206 Upperhill Drive City Riverside State CA Zip Code 92507 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer University of California, Riverside Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2242159</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Caroline R. Arms

Mailing Address 166 Duke Of Gloucester Street

City State Zip Code  
 Annapolis MD 21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Library of Congress

Occupation  
Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250724

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Arletta M. Ashe

Mailing Address 10 Prout Place

City State Zip Code  
 Cape Elizabeth ME 04107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248379

Amount of Each Receipt this Period

85.00

C. Full Name (Last, First, Middle Initial)

Ms. Bonnie Dubbin Askowitz

Mailing Address 12101 SW 93 Avenue

City State Zip Code  
 Miami FL 33176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241946

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1335.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
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(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jon Michael Asmundson Mailing Address 1324 La Pointe Road City State Zip Code Eureka CA 95503 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243291 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	7	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		0	8		2	0	0	7																							
1000.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. David Atik Mailing Address 107 W 86th St # 2A City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation NYC Dept. of Finance Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2247391 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	4		2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		2	4		2	0	0	7																							
250.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Lynn Babicka Mailing Address 387 Wheeler Place City State Zip Code Haworth NJ 07641 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation UNEMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2247631 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">900.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	0	7	900.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		2	5		2	0	0	7																							
900.00																																

SUBTOTAL of Receipts This Page (optional) .....

2150.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Roger Badeker Mailing Address 26310 Illinois Creek Rd City Alma State KS Zip Code 66401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243354</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Elizabeth B. Baer Mailing Address 329 Heritage Point City Morgantown State WV Zip Code 26505 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243182</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Elizabeth B. Baer Mailing Address 329 Heritage Point City Morgantown State WV Zip Code 26505 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246777</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Pat K. Bakalian  
Mailing Address 814 Escalona Drive

City State Zip Code  
Santa Cruz CA 95060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244230

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Lisa L Baker  
Mailing Address 241 S. Grand Oaks Ave

City State Zip Code  
Pasadena CA 91107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Musick, Peeler & Garrett  
LLP

Occupation  
Law Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244195

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence C. Baldwin  
Mailing Address 13708 Leland Road

City State Zip Code  
Centreville VA 20120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251966

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 401 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Alison Baldwin			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 1415 E 54th Place			<b>Transaction ID:</b> 2245036	
City State Zip Code Chicago IL 60615			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer NORC		Occupation STATISCIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 206.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Cynthia B. Baldwin			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 29 Chestnut Woods Road			<b>Transaction ID:</b> 2250153	
City State Zip Code Redding CT 06896			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer General Reinsurance Corpo- ration		Occupation Reinsurance Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Marian W. Baldy			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 25 Oak Drive			<b>Transaction ID:</b> 2251003	
City State Zip Code Chico CA 95926			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Millicent Ball Mailing Address 1415 Country Ridge Drive City State Zip Code Desoto TX 75115 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7 <b>Transaction ID: 2243400</b> Amount of Each Receipt this Period 250.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Catherine P. Ball Mailing Address 5 Old Coach Road City State Zip Code Napa CA 94558 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247403</b> Amount of Each Receipt this Period 250.00
Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Helen P. Ballentine Mailing Address 3142 Gracefield Road Apt 218 City State Zip Code Silver Spring MD 20904 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2247107</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 403 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Bardwell Mailing Address 4850 Tobosa Road City Las Cruces State NM Zip Code 88001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer World Wildlife Fund Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2247158 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	3		2	0	0	7	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		2	3		2	0	0	7																							
1000.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Kathryn E. Barnard Mailing Address 11508 Durland Avenue NE City Seattle State WA Zip Code 98125 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Univ. of Washington Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2248423 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">85.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	7	85.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	6		2	0	0	7																							
85.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Linda Barnello Mailing Address 355 Pinewood Drive City San Rafael State CA Zip Code 94903 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2245078 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	0	7	200.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	7		2	0	0	7																							
200.00																																

SUBTOTAL of Receipts This Page (optional) .....

1285.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 404 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gretchen Barsness Mailing Address 5327 Highpointe Terrace City State Zip Code Bloomington MN 55437 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252344</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Pamela Bartko Mailing Address 2655 Buena Vista Way City State Zip Code Berkeley CA 94708 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243376</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sandra Bass Mailing Address 161 W. Harrison Street, # 607 City State Zip Code Chicago IL 60605 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Computer Programmer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251461</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Doris Z. Bato

Mailing Address 60 Sutton Pl S

City State Zip Code  
New York NY 10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245731

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Dr. Nancy W Bauer

Mailing Address 8511 Navajo

City State Zip Code  
Philadelphia PA 19118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WomenMatter, Inc.

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241419

Amount of Each Receipt this Period

750.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Jay Baumohl

Mailing Address 15224 Nooning Tree Court

City State Zip Code  
Chesterfield MO 63017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244487

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jan Baxter Mailing Address 238 Miramar Ave. City Montecito State CA Zip Code 93108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252335</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Kathryn Reed Bayless Mailing Address 1607 W. Main St. City Princeton State WV Zip Code 24740 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-employed, Bayless & McFadden LLP Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246621</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Beard Mailing Address 541 Barberry Lane City Louisville State KY Zip Code 40206 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245051</b> Amount of Each Receipt this Period 1000.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Marlys J. Becker

Mailing Address 1279 Central Ave N

City State Zip Code  
 Valley City ND 58072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248832

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B.** Mr. William (Bill) G. Becker

Mailing Address 43791 Washburn Drive

City State Zip Code  
 Three Rivers CA 93271

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248919

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Marjorie Becker-Lewin

Mailing Address 25 W 81st Street, Apt 6-A

City State Zip Code  
 New York NY 10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245724

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

310.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Adrienne R. Beckmann Mailing Address 60 Aspetuck Fls City State Zip Code Fairfield CT 06824 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245454</b> Amount of Each Receipt this Period 500.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Patricia Beilman Mailing Address 25 West 94th Street City State Zip Code New York NY 10025 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2247632</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Kathy L. Beitscher Mailing Address 4910 Crestland Drive City State Zip Code La Mesa CA 91941 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245766</b> Amount of Each Receipt this Period 250.00
Name of Employer Occupation Self Volunteer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joan Wolfers Belkin Mailing Address 8 Rocky Ledge Road City Weston State MA Zip Code 02493 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1261.00			Date of Receipt MM / DD / YYYY 05 / 21 / 2007 <b>Transaction ID: 2247814</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lois E. Bell Mailing Address 7142 Magoun Avenue City Hammond State IN Zip Code 46324 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt MM / DD / YYYY 05 / 08 / 2007 <b>Transaction ID: 2243185</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Florence Beller Mailing Address 5101 Sunrise Hills Drive City Fair Oaks State CA Zip Code 95628 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt MM / DD / YYYY 05 / 22 / 2007 <b>Transaction ID: 2246875</b> Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) .....

2300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 410 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Wendy W. Benchley Mailing Address 35 Boudinot Street City State Zip Code Princeton NJ 08540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Princeton Borough Common Council Occupation Princeton Borough Councilwoman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244949</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Gail R. Benjamin Mailing Address 24997 Back Creek Drive City State Zip Code St. Michaels MD 21663 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247780</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Robert Bentz Mailing Address 3001 Valley Brook Drive City State Zip Code Champaign IL 61822 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249496</b> Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional) .....

765.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Bonnie L. Berger Mailing Address 220 Boylston Street Apt 1618 City State Zip Code Boston MA 02116 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243940</b> Amount of Each Receipt this Period 250.00
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Nancy Bergstrom Mailing Address 3935 Ramble Creek Drive City State Zip Code Missouri City TX 77459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249137</b> Amount of Each Receipt this Period 85.00
Name of Employer Occupation UTH Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Marjorie Berk Mailing Address 7 E 14th Street, Apt.1117 City State Zip Code New York NY 10003 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249864</b> Amount of Each Receipt this Period 85.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		

SUBTOTAL of Receipts This Page (optional) .....

420.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Deborah L. Berkman Mailing Address 16 Channing Place City State Zip Code Cambridge MA 02138 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244542</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Terry G. Berman Mailing Address 1740 Broadway Street, Apt. 506 City State Zip Code San Francisco CA 94109 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2248030</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ruth Berman Mailing Address 4423 39th Street NW City State Zip Code Washington DC 20016 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2247102</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 413 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Audrey Bernfield

Mailing Address 270 West 19th Street, #4A

City State Zip Code  
 New York NY 10011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2242825

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Dene K. Bernstein

Mailing Address 7900 Old York Road, Apt. 413B

City State Zip Code  
 Elkins Park PA 19027

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251860

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Murray L. Berrie

Mailing Address 14745 Draft Horse Ln

City State Zip Code  
 Wellington FL 33414

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248887

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Maria Berry

Mailing Address 14 Monarch Bay Plaza # 283

City State Zip Code  
 Monarch Beach CA 92629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241249

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Martha Berry

Mailing Address 188 8th Avenue

City State Zip Code  
 Brooklyn NY 11215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Berry Jewelry

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245721

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Suzanne Best

Mailing Address 2 Charlton Street

City State Zip Code  
 New York NY 10014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244282

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 415 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Emilie W. Betts Mailing Address 23 Valley Road City Norwalk State CT Zip Code 06854 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 Transaction ID: 2250990 Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joan Dolan Biblo Mailing Address 4561 Walnut Street City Kansas City State MO Zip Code 64111 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 Transaction ID: 2247170 Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Edna R Bick Mailing Address 9468 Beecher Rd. City Flushing State MI Zip Code 48433 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Genesys Integrated Group Practice Occupation Physician semi-retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Transaction ID: 2242181 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mr. Benjamin Lee Bird

Mailing Address P.O. Box 356

City State Zip Code  
 Flint Hill VA 22627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245038

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Mr. Robert W. Birge

Mailing Address 1 Greenwood Common

City State Zip Code  
 Berkeley CA 94708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2251001

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Ms. Virginia R. Bishop

Mailing Address 6514 Willow Hill Court

City State Zip Code  
 Centerville OH 45459

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247001

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Virginia Y. Blackledge Mailing Address 663 Coventry Road City State Zip Code Kensington CA 94707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Psychiatrist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246826</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn Blackwell Mailing Address 3779 Center Road City State Zip Code E. Montpelier VT 05651 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Community College of Vermont Occupation Historian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250842</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Kris Bledsoe Mailing Address 3500 SW Redmond Hills Road City State Zip Code McMinnville OR 97128 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Williamette Valley Medical Center Occupation Chaplain Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2242923</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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FOR LINE NUMBER: PAGE 418 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gay S Block		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 1530 Bishops Lodge Rd		
City Santa Fe	State NM	Zip Code 87506
FEC ID number of contributing federal political committee. C		<b>Transaction ID:</b> 2247532
Name of Employer Self		Amount of Each Receipt this Period 1000.00
Occupation Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

<b>B.</b> Full Name (Last, First, Middle Initial) Hon. Elaine Bloom		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 5255 Collins Avenue		
City Miami Beach	State FL	Zip Code 33140
FEC ID number of contributing federal political committee. C		<b>Transaction ID:</b> 2245371
Name of Employer state of florida		Amount of Each Receipt this Period 500.00
Occupation representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary L Boas		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 7
Mailing Address 3540 NE 147		
City Lake Forest Park	State WA	Zip Code 98155
FEC ID number of contributing federal political committee. C		<b>Transaction ID:</b> 2242208
Name of Employer Retired		Amount of Each Receipt this Period 500.00
Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 419 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Billie M. Bobbitt Mailing Address 3003 Cisco Road W14 City State Zip Code Sidney OH 43456 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248238</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Boberg Mailing Address 41 Lake Avenue City State Zip Code Piedmont CA 94611 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250072</b> Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Walt S. Bobo Mailing Address 5610 Saint Moritz Street City State Zip Code Bellaire TX 77401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer prefer not to disclose Occupation Mechanical Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245537</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

**325.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Anne Boley

Mailing Address 17 Holt Place

City State Zip Code  
 Madison WI 53719

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAUS - North

Occupation  
Uniserv Dir (WEAC) (NEA)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245138

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Melissa Bondy

Mailing Address 2407 Watts

City State Zip Code  
 Houston TX 77030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251183

Amount of Each Receipt this Period

125.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Nancy M. Bonner

Mailing Address 3383 Dunscroft Ct

City State Zip Code  
 Keswick VA 22947

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241227

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

625.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elaine S. Booth Mailing Address 3 Winterbranch City Irvine State CA Zip Code 92604 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2245092</b> Amount of Each Receipt this Period 150.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Margaret B. Boverman Mailing Address 14809 Pennfield Cir Apt 201 City Silver Spring State MD Zip Code 20906 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt MM / DD / YYYY 05 / 22 / 2007 <b>Transaction ID: 2247063</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. John Bowers Mailing Address 263 Frederick Street City san francisco State CA Zip Code 94117 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer EFI Occupation Software Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2245079</b> Amount of Each Receipt this Period 250.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Debra Boyle Mailing Address 7702 88th Place SE City Mercer Island State WA Zip Code 98040 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 08 / 2007 <b>Transaction ID:</b> 2243060 Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jeanne Boynton Mailing Address 27 Burton Road Box 598 City Lakeville State CT Zip Code 06039 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 <b>Transaction ID:</b> 2242112 Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Nancy H. Brach Mailing Address 191 South Mountain Avenue City Montclair State NJ Zip Code 07042 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 18 / 2007 <b>Transaction ID:</b> 2245842 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Robin M. Brand Mailing Address 42 Bates St., NW City Washington State DC Zip Code 20001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Gill Action Occupation COO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250567</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Linda Brandenburger Mailing Address 5201 Pleasant Drive City Sacramento State CA Zip Code 95822 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252354</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Donna Brasley Mailing Address 37 W. 72 Street # 16E City New York State NY Zip Code 10023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250074</b> Amount of Each Receipt this Period 85.00

**SUBTOTAL** of Receipts This Page (optional) .....

435.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Miss. Karen L. Braun

Mailing Address 8027 Cobble Creek Circle

City State Zip Code  
 Potomac MD 20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244307

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Kate Braverman

Mailing Address 882 Chestnut Street

City State Zip Code  
 San Francisco CA 94133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243059

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Margaret L. Brennan

Mailing Address 135 Grace Trl

City State Zip Code  
 Ash Flat AR 72513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251830

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jeanne M Brett			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address MORS Kellogg Northwestern University			<b>Transaction ID:</b> 2245578	
City Evanston State IL Zip Code 60208			Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Northwestern University		Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Margaret Brevoort			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 2125 First Avenue # 2503			<b>Transaction ID:</b> 2240849	
City Seattle State WA Zip Code 98121			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer A.M. Todd Botanicals		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Arlin A. Briley			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 219 4th Avenue N. Unit 300			<b>Transaction ID:</b> 2243665	
City St. Petersburg State FL Zip Code 33701			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Verizon Communications In- c.		Occupation telecommunications tech		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

5350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn F. Brill		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 119 S 3rd Street		<b>Transaction ID:</b> 2245862	
City <u>Lewisburg</u>	State PA	Zip Code 17837	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Carole J Brodtkin		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 412 Ferrell Rd.		<b>Transaction ID:</b> 2248036	
City <u>Mullica Hill</u>	State NJ	Zip Code 08062	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer National Park Service	Occupation Park Ranger		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ethel S. Brody		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 19 Quinine Hill		<b>Transaction ID:</b> 2245687	
City <u>Columbia</u>	State SC	Zip Code 29204	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Miss Helen D. Brooks

Mailing Address 8 Arnold Park

City State Zip Code  
Rochester NY 14607

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247575

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Barbara Brothers

Mailing Address 2304 Fifth Avenue

City State Zip Code  
Youngstown OH 44504

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242183

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Mary Lou Brown

Mailing Address 139 Via Baja

City State Zip Code  
Ventura CA 93003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250939

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Heather Brown			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 2031 Milford			<b>Transaction ID:</b> 2246145	
City State Zip Code Houston TX 77098			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Bracewell & Giuliani LLP		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. John Swinton Brown, Jr.			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 7301 Burnet Road # 102-122			<b>Transaction ID:</b> 2247833	
City State Zip Code Austin TX 78757			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Catherine Brown			Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address PO Box 7464			<b>Transaction ID:</b> 2241983	
City State Zip Code Waco TX 76714			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Investments		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Joan R. Brownstein

Mailing Address PO Box 850

City State Zip Code  
 Newburyport MA 01950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251938

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Amorette N Bryant

Mailing Address 11430 Valley Spring

City State Zip Code  
 Houston TX 77043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244105

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)

Ms. Nancy L Buc

Mailing Address 4200 Massachusetts Ave. NW  
 #310

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Buc & Beardsley

Occupation

lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243416

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5270.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Bree Buchanan			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 1510 Edgewood Ave.			<b>Transaction ID:</b> 2244223	
City State Zip Code Austin TX 78722			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Univ. of Texas		Occupation lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Gretchen M. Buchanan			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 7638 Chadwick St			<b>Transaction ID:</b> 2241233	
City State Zip Code Prarie Village KS 66208			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Kansas Univ Medical Ctr		Occupation Microbiologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Rita E. Buchsbaum			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 195 Davison Place			<b>Transaction ID:</b> 2246355	
City State Zip Code Englewood NJ 07631			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Housewife		Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Daphne Budge Mailing Address 5648 E Cambridge Avenue City State Zip Code Scottsdale AZ 85257 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250353</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mary Stewart Burgher Mailing Address Kastelsvej 9 3TV 2100 Copenhagen City State Zip Code Denmark 00000 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation WHO Copy Editor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241852</b> Amount of Each Receipt this Period 2000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. William T Burke Mailing Address 7735 57th Avenue NE City State Zip Code Seattle WA 98115 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245801</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

**2150.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lisa J. Burns Mailing Address 5910 Calla Drive City McLean State VA Zip Code 22101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Human Resources Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246253</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Pamela Burroff-Murr Mailing Address 3653 N 50th W. City Williamsport State IN Zip Code 47993 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249982</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Verona D. Burton Mailing Address 512 Hickory Street City Mankato State MN Zip Code 56001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246999</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. Janice K. Bush

Mailing Address 12 Toftrees Court

City State Zip Code  
 Princeton NJ 08540

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Johnson & Johnson

Occupation  
Physician Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247246

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Susan E. Butler-Siler

Mailing Address 464 Windgate Road

City State Zip Code  
 Sacramento CA 95864

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242664

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Susan E. Butler-Siler

Mailing Address 464 Windgate Road

City State Zip Code  
 Sacramento CA 95864

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250719

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Catherine F. Butenwieser		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 200 Marsh St		<b>Transaction ID:</b> 2251874	
City Belmont	State MA	Zip Code 02478	Amount of Each Receipt this Period 110.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Judith E Campbell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 54 Samson Ave		<b>Transaction ID:</b> 2242157	
City Madison	State NJ	Zip Code 07940	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer New York Life Insurance Co	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Patricia B Campbell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 80 Lakeside Dr		<b>Transaction ID:</b> 2250922	
City Groton	State MA	Zip Code 01450	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Campbell-Kibler Associates	Occupation Educational researcher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1610.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

A. Tere Canida

Mailing Address 7125 Lago Drive, W

City State Zip Code  
 Coral Gables FL 33143

FEC ID number of contributing federal political committee.

C

Name of Employer  
TCHOccupation  
Investment Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242721

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Ms. Julie Carithers

Mailing Address 2910 Brushycreek Road

City State Zip Code  
 Greer SC 29650

FEC ID number of contributing federal political committee.

C

Name of Employer  
sole proprietorOccupation  
Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248295

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

C. Ms. Frances S. Carlin

Mailing Address 152 Sutton Manor Road

City State Zip Code  
 New Rochelle NY 10801

FEC ID number of contributing federal political committee.

C

Name of Employer  
Sterlin ProductsOccupation  
Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246199

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1315.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Andrea S. Carlise

Mailing Address 2835 Johnson Avenue

City State Zip Code  
 Alameda CA 94501

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249029

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B.** Dr. Donna M Carlon

Mailing Address 1905 Edgewood Drive

City State Zip Code  
 Edmond OK 73013

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University of Central Okl-  
ahoma

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249491

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Ellen P. Carnaghan

Mailing Address 1618 Bellevue Avenue

City State Zip Code  
 Saint Louis MO 63117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
St. Louis Univ.

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251159

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

270.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mrs. Elsie R. Carr

Mailing Address 100 Thorndale Drive # 306

City State Zip Code  
 San Rafael CA 94903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241909

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Mr. John L. Carr

Mailing Address 2776 Highway 28 N

City State Zip Code  
 Clayton GA 30525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2242003

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Minnie J. Carson

Mailing Address 12440 Rivercrest Drive

City State Zip Code  
 Little Rock AR 72212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2650.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245093

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Sally Carson

Mailing Address 3153 N 17th Street

City State Zip Code  
 Arlington VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dept. of Defense, US Mari-  
ne Corps

Occupation  
Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247109

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Ms. Terry Carter

Mailing Address 17654 SW 12th Street

City State Zip Code  
 Pembroke Pine FL 33029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245265

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Ms. Kathleen Carter

Mailing Address 288 Todd Avenue

City State Zip Code  
 Sonoma CA 95476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carter, Carter & Carter,  
Inc.

Occupation  
Technical Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249494

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

1150.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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<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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sue E. Case Mailing Address 7932 Hillside Avenue City Los Angeles State CA Zip Code 90046 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer UCLA Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250649</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Katherine A. Castor Mailing Address 3012 Harbor View Avenue City Tampa State FL Zip Code 33611 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Broad and Cassel Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248547</b> Amount of Each Receipt this Period 85.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Elizabeth W. Caswell Mailing Address 5002 Quincy Court City Saline State MI Zip Code 48176 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Creative Memories UL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 666.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244229</b> Amount of Each Receipt this Period 333.00

**SUBTOTAL** of Receipts This Page (optional) .....

668.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. Barry F. Cavaghan  
Mailing Address 550 Pajaro Court

City State Zip Code  
Sacramento CA 95864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Marriage & Family Therap

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245690

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Pamela Caywood  
Mailing Address 1410 Wright Avenue

City State Zip Code  
Sunnyvale CA 94087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245897

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Marcelle Cedars  
Mailing Address 96 Reed Ranch Rd

City State Zip Code  
Bel Tiburon CA 94920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U. Cincinnati Med Ctr

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250705

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Dr. Jean R. Ceglowski

Mailing Address P.O. Box 38

City State Zip Code  
 Rupert VT 05768

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Veterinarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246988

Amount of Each Receipt this Period

200.00

**B.** Full Name (Last, First, Middle Initial)

Mr. Christopher Celeste

Mailing Address 2992 Chadbourne Road

City State Zip Code  
 Cleveland OH 44120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Fridayway World

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 7

Transaction ID: 2243522

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)

Mrs. Jill A. Chambers

Mailing Address 332 Harper Lane

City State Zip Code  
 Danville CA 94526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247552

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Dr. Doris Chambers

Mailing Address 963 Club Pond Road

City State Zip Code  
 Raeford NC 28376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2247691

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Susan M. Chandler

Mailing Address 1617 Quincey Place

City State Zip Code  
 Honolulu HI 96816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dept. of Human Services

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251142

Amount of Each Receipt this Period

150.00

**C.** Full Name (Last, First, Middle Initial)

Mr. David Chandler

Mailing Address 77 Spear Street

City State Zip Code  
 Metuchen NJ 08840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rutgers University

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250751

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Irene Chang		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 2275 Mountain Dr.		<b>Transaction ID:</b> 2244119
City Bartlesville	State OK	Zip Code 74003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Writer/Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Rachel Chanoff		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 130 Jane Street #5S		<b>Transaction ID:</b> 2248536
City New York	State NY	Zip Code 10004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer Self	Occupation Art and Film Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Paul G Chapin		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 829 Gonzales Road		<b>Transaction ID:</b> 2245559
City Santa Fe	State NM	Zip Code 87501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

**SUBTOTAL** of Receipts This Page (optional) .....

435.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Chase  
Mailing Address 405 Castleton Circle

City State Zip Code  
Tallahassee FL 32312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246265

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Chase  
Mailing Address 405 Castleton Circle

City State Zip Code  
Tallahassee FL 32312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251160

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edgar M. Chase  
Mailing Address 9406 Michael Drive

City State Zip Code  
Clinton MD 20735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251483

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Chatham  
Mailing Address 55 Crosby Street

City State Zip Code  
New York NY 10012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self

Occupation  
artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250589

Amount of Each Receipt this Period

65.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Harvey L. Chernoff  
Mailing Address 251 St. Paul Street

City State Zip Code  
Brookline MA 02446

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243295

Amount of Each Receipt this Period

200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William Bailey Cherry  
Mailing Address 404 Kings Brg NE

City State Zip Code  
Atlanta GA 30329

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251975

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1265.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Margaret S. Child Mailing Address 2853 Ontario Road NW Apt. 101 City Washington State DC Zip Code 20009 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251176</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Holly H Childs Mailing Address 924 Reed Valley Rd City Fayetteville State AR Zip Code 72704 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247757</b> Amount of Each Receipt this Period 150.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Marilee Chinnici-Zuercher Mailing Address 6043 Glenbarr Place City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer FIRSTLINK Occupation President/CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248497</b> Amount of Each Receipt this Period 85.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		335.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Leslie S. Christensen  
Mailing Address 9728 Swift Creek Court

City State Zip Code  
Fairfax Station VA 22039

FEC ID number of contributing federal political committee.

C

Name of Employer  
Allfirst Trust CompanyOccupation  
Bank Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242436

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Theodore Chu  
Mailing Address 127 E. 30th Street, Apt. 5B

City State Zip Code  
New York NY 10016

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251739

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Laura Chunossoff  
Mailing Address 279 E 44th Street #90

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242459

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

400.00

TOTAL This Period (last page this line number only) .....

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Laura Chunosoff

Mailing Address 279 E 44th Street #90

City State Zip Code  
 New York NY 10017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248179

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Carmela Cipriano

Mailing Address 260 65th Street, Apt. 11P

City State Zip Code  
 Brooklyn NY 11220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246947

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Patricia Clark

Mailing Address 13719 Lake Drive

City State Zip Code  
 Plainfield IL 60544

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245408

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Patricia A. Clark

Mailing Address 1994 East River Road

City State Zip Code  
 Cortland NY 13045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247759

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Patricia A. Clark

Mailing Address 1994 East River Road

City State Zip Code  
 Cortland NY 13045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247426

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Carolyn Clarke

Mailing Address 20051 Ocean Key Drive

City State Zip Code  
 Boca Raton FL 33498

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241201

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

625.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Genevieve L. Clarke

Mailing Address 301 Fairway Village

City State Zip Code  
 Leeds MA 01053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252516

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

Ms. S. Louise Cleary

Mailing Address 655 Terrace Boulevard

City State Zip Code  
 Orlando FL 32803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lockheed Martin

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246402

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Marilyn T. Clements

Mailing Address 104 Wallacks Point

City State Zip Code  
 Stamford CT 06902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Artist/tTeacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2245568

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

6250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Patricia Wa Cliff Mailing Address 345 W 13th Street, Apt.2A City State Zip Code New York NY 10014 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Douglas Elliman Sr. Vice President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2240845</b> Amount of Each Receipt this Period 1000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Hope Cobb Mailing Address 142 Mercer Street City State Zip Code Princeton NJ 08540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251853</b> Amount of Each Receipt this Period 200.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Caroline E Coderre Mailing Address 51 Waldorf Road City State Zip Code Newton MA 02464 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation The Darrow Company Certified Financial Planner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246498</b> Amount of Each Receipt this Period 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Everett Coe Mailing Address 145 Shadow Creek Road City State Zip Code Berry Creek CA 95916 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243186</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Alexandra Coe Mailing Address 3827 Sheridan Avenue S. City State Zip Code Minneapolis MN 55410 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251223</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Doloris C. Cogan Mailing Address 1616 N. Bay Drive City State Zip Code Elkhart IN 46514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249110</b> Amount of Each Receipt this Period 33.00

**SUBTOTAL** of Receipts This Page (optional) .....

1533.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Cohen Mailing Address 180 E. End Avenue Apt. 25H City State Zip Code New York NY 10023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Express Occupation Mktg Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247290</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Shirley K. Cohen Mailing Address 401 South Berkeley Avenue City State Zip Code Pasadena CA 91107 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2251002</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Marjorie Jane Cohen Mailing Address 846 Ponce deLeon Terrace, NE City State Zip Code Atlanta GA 30306 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Geared to Go Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2240847</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

**2250.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 454 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Jonathan Allen Cohn Mailing Address 1025 Spring Street City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wayne State University Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2240937</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Carola V. Cohn Mailing Address 1547 Mt. Olivet Road City Zirconia State NC Zip Code 28790 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245275</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Denice M. Colazzo Mailing Address 7 Lockwood Road City Scarsdale State NY Zip Code 10583 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249884</b> Amount of Each Receipt this Period 85.00

**SUBTOTAL** of Receipts This Page (optional) .....

1335.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Patricia T. Colburn

Mailing Address 1559 Oakdale St.

City State Zip Code  
 Pasadena CA 91106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242468

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Sue L. Colburn

Mailing Address 236 N Water Street  
 4th Floor

City State Zip Code  
 Milwaukee WI 53202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Achievements Unlimited SC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250264

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Nancy S. Cole

Mailing Address 10475 Cross St

City State Zip Code  
 Hammondsport NY 14840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248047

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

285.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Ida Cole		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 505 Greenwich Street Apt. 11G		<b>Transaction ID:</b> 2251086	
City New York	State NY	Zip Code 10013	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Suzanne Cole-Kohlberg		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 63 Los Trancos Rd		<b>Transaction ID:</b> 2250968	
City Portola Valley	State CA	Zip Code 94028	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Elinor Coleman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 1100 Dartmouth Road		<b>Transaction ID:</b> 2241322	
City Alexandria	State VA	Zip Code 22314	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional) .....

700.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sharon Coleman Mailing Address 2919 N 33rd Street City Tacoma State WA Zip Code 98407 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250249</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joan F. Coleman Mailing Address 5530 Fernhoff Road City Oakland State CA Zip Code 94619 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244783</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Charlotte Colhoun Mailing Address 1716 Brazo Circle City Harlingen State TX Zip Code 78552 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Interior Designer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242484</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Virginia Collins  
Mailing Address 1510 Bradley Avenue

City State Zip Code  
Rockville MD 20851

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243678

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Virginia Collins  
Mailing Address 1510 Bradley Avenue

City State Zip Code  
Rockville MD 20851

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247451

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eddy Collins  
Mailing Address 4021 Milford Place

City State Zip Code  
Norman OK 73072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Oneok, Inc.

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248042

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
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(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Ann M. Collins Mailing Address 7220 Farr Street City Annandale State VA Zip Code 22003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2150.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246827</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth L Colton Mailing Address 1848 Pine Street City San Francisco State CA Zip Code 94109 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1510.23		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2247527</b> Amount of Each Receipt this Period 1110.23 In-Kind
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Judy Colton Mailing Address 3 Long Marsh Lane City North Oaks State MN Zip Code 55127 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246914</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

2210.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. Elizabeth B. Conant

Mailing Address 661 Downing Lane

City State Zip Code  
 Buffalo NY 14221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2247620

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Janet M Conn

Mailing Address 5804 Oak Lane

City State Zip Code  
 Edina MN 55436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247412

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Anthony S. Cookson

Mailing Address 1908 Thayer Avenue

City State Zip Code  
 Los Angeles CA 90025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249932

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary Cooper Mailing Address 1165 5th Avenue City New York State NY Zip Code 10029 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246825</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Paula Cooper Mailing Address 465 West 23rd Street PH B City New York State NY Zip Code 10011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243723</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Nancy S. Cooper Mailing Address 76 Coles Drive City Doylestown State PA Zip Code 18901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer fox pool mgmt Occupation Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251495</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Marion L. Copenhaver

Mailing Address 80 Lyme Road, Apt. 158

City State Zip Code  
 Hanover NH 03755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248403

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)

Ms. Joy Cordery

Mailing Address 14 Atterbury Road

City State Zip Code  
 Southampton NY 11968

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249216

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)

Mrs. J. Dumitru Corley

Mailing Address 5151 Camino Real

City State Zip Code  
 Riverside CA 92509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
County of Riverside

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252330

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Chloe Cornell Mailing Address 6361 Pelican Bay Blvd # 701 City Naples State FL Zip Code 34108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243134</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn J. Coronado Mailing Address 1426 Toyon Drive City Concord State CA Zip Code 94520 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241286</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn J. Coronado Mailing Address 1426 Toyon Drive City Concord State CA Zip Code 94520 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246233</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Terry H. Corum Mailing Address 5810 Woodland Drive City Oxon Hill State MD Zip Code 20745 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242707</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Terry H. Corum Mailing Address 5810 Woodland Drive City Oxon Hill State MD Zip Code 20745 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251514</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Cathleen A Costello Mailing Address 1308 Forest Glen Drive So. City Winnetka State IL Zip Code 60093 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252043</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Doris B Coster			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 135 Valentine Road			<b>Transaction ID:</b> 2248252	
City State Zip Code Pomfret Center CT 06259			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer 		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Mary Lou Courge			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 1905 Princess Street			<b>Transaction ID:</b> 2242455	
City State Zip Code Wilmington NC 28405			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Self		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Mary Lou Courge			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 1905 Princess Street			<b>Transaction ID:</b> 2243367	
City State Zip Code Wilmington NC 28405			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Self		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Elizabeth A. Courtenay

Mailing Address 1800 6th Street

City State Zip Code  
 Manhattan Beach CA 90266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249903

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)

Ms. Stephanie Covington

Mailing Address 407 7th Street

City State Zip Code  
 Del Mar CA 92014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Psychotherapsit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241209

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Stephanie Covington

Mailing Address 407 7th Street

City State Zip Code  
 Del Mar CA 92014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Psychotherapsit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247600

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mrs. Lana A. Cowell

Mailing Address 2233 Demington Drive

City State Zip Code  
 Cleveland OH 44106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248183

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)

Ms. Sandra J. Coyner

Mailing Address 1160 Fern Street

City State Zip Code  
 Ashland OR 97520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240854

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Ms. Vivian S. Crabtree

Mailing Address 2661 Tallant Rd Apt MN724

City State Zip Code  
 Santa Barbara CA 93105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246991

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sharon A. Craddock Mailing Address 10000 Biscayne Lane City State Zip Code <u>Damascus</u> <u>MD</u> <u>20872</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt M M / D D / Y Y Y Y Y <u>0 5</u> / <u>1 6</u> / <u>2 0 0 7</u> <b>Transaction ID:</b> 2248486 Amount of Each Receipt this Period <u>50.00</u>
Name of Employer Our House Occupation Office Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <u>250.00</u>		
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Anna Lee Crawford Mailing Address 195 14th Street, NE PH 605 City State Zip Code <u>Atlanta</u> <u>GA</u> <u>30309</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt M M / D D / Y Y Y Y Y <u>0 5</u> / <u>1 6</u> / <u>2 0 0 7</u> <b>Transaction ID:</b> 2245102 Amount of Each Receipt this Period <u>100.00</u>
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <u>300.00</u>		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Karen S. Criddle Mailing Address 9109 Lake Washington Blvd NE City State Zip Code <u>Bellevue</u> <u>WA</u> <u>98004</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt M M / D D / Y Y Y Y Y <u>0 5</u> / <u>3 1</u> / <u>2 0 0 7</u> <b>Transaction ID:</b> 2252492 Amount of Each Receipt this Period <u>250.00</u>
Name of Employer Self Occupation potter Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <u>250.00</u>		
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<u>400.00</u>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Crockett  
Mailing Address 10613 Pinehurst Drive

City State Zip Code  
Austin TX 78747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247831

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Nancy Crowe  
Mailing Address P.O. Box 18

City State Zip Code  
Mellenville NY 12544

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Postal Service

Occupation  
Postmaster

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250660

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Areta Crowell  
Mailing Address 2934 Beachwood Drive

City State Zip Code  
Los Angeles CA 90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243961

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Areta Crowell Mailing Address 2934 Beachwood Drive City Los Angeles State CA Zip Code 90068 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243989</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sheila C. Crowell Mailing Address 376 N. Fullerton Avenue City Montclair State NJ Zip Code 07043 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation educational writer/consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246413</b> Amount of Each Receipt this Period 400.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Judith E. Crowell Mailing Address 608 Altara Avenue City Coral Gables State FL Zip Code 33146 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Advanced Dermatology Management Occupation dermatologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249337</b> Amount of Each Receipt this Period 80.00

**SUBTOTAL** of Receipts This Page (optional) .....

980.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Pedro Cuatrecasas

Mailing Address 7912 Entrada De Luz East

City State Zip Code  
 San Diego CA 92127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251319

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Marguerite P. Cullman

Mailing Address 300 Park Drive

City State Zip Code  
 Severna Park MD 21146

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244266

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Beverly B. Cunningham

Mailing Address 16 Ledge Road Unit 71

City State Zip Code  
 Blue Hill ME 04614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243657

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Lew Cunningham

Mailing Address 3886 La Jolla Village Drive

City State Zip Code  
 La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250904

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Jackie B. Curley

Mailing Address 8 Old Penzance Road

City State Zip Code  
 Rockport MA 01966

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Wand.org

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249823

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Cynthia Curran

Mailing Address 1808 Emerson Avenue South

City State Zip Code  
 Minneapolis MN 55403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
College of St. Benedict

Occupation  
academic historian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244096

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Anna M Curren		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 230 W Laurel Street Ste 705		<b>Transaction ID:</b> 2251307	
City State Zip Code San Diego CA 92101		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self - Author		Occupation Semi-Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Cecile Currier		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 1080 San Mateo Drive		<b>Transaction ID:</b> 2242398	
City State Zip Code Menlo Park CA 94025		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer El Camino Hospital, Mt. View, CA		Occupation Mental Health Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Kay Curry		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 150 Lansdale Ave.		<b>Transaction ID:</b> 2247934	
City State Zip Code San Francisco CA 94127		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Technology Sciences Group Inc.		Occupation Consultant	
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) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Dorothy F. Curry

Mailing Address 5318 Mission Woods Terrace

City State Zip Code  
 Shawnee Mission KS 66205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246350

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Jessica Curtis

Mailing Address 135 Corson Ave

City State Zip Code  
 Staten Island NY 10301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
VNSNY

Occupation  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244238

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Thomas R. Curtis

Mailing Address 1903 Rolling Hills Avenue SE

City State Zip Code  
 Renton WA 98055

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
State of Washington

Occupation  
Social Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248948

Amount of Each Receipt this Period

85.00

**SUBTOTAL** of Receipts This Page (optional) .....

435.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Carrie Cwiak

Mailing Address 449 Euclid Terrace NE

City State Zip Code  
 Atlanta GA 30307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Emory University

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244520

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Jo Anna Dale

Mailing Address 704 N. Ponca Drive

City State Zip Code  
 Independence MO 64056

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246279

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Dorothy R. Daly

Mailing Address 18 Bluestem Drive

City State Zip Code  
 Scottsbluff NE 69361

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248170

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Jean Marie Daniels

Mailing Address 2625 East Southern Avenue  
C-202

City State Zip Code  
Tempe AZ 85282

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250942

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Ruth R. Daniels

Mailing Address 28404 Emerald Drive

City State Zip Code  
Gold Beach OR 97444

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248709

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Estelle T. Dashman

Mailing Address 11 Riverview Farm Road

City State Zip Code  
Ossining NY 10562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252415

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Sheila K Davidson

Mailing Address 2150 Mission Ridge Rd.

City State Zip Code  
 Santa Barbara CA 92103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249608

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Christine G Davis

Mailing Address 1004 E Constitution Dr

City State Zip Code  
 Gilbert AZ 85296

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244198

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Christine G Davis

Mailing Address 1004 E Constitution Dr

City State Zip Code  
 Gilbert AZ 85296

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245028

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

385.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Alice G. Davis

Mailing Address 215 W. 14th Street

City State Zip Code  
 Wilmington DE 19801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Perinatal Associataion of  
DE.

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245541

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Anita Davis

Mailing Address 4846 Knickerbocker St

City State Zip Code  
 Houston TX 77035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241262

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Dawn Day

Mailing Address 99 Meadowbrook Drive

City State Zip Code  
 Princeton NJ 08540

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Sociologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244886

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Dorothy A. Dayton  
Mailing Address 2423 Walden Court

City State Zip Code  
Iowa City IA 52246

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241906

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Minnie Dean  
Mailing Address 112 2nd Street

City State Zip Code  
Radford VA 24141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248856

Amount of Each Receipt this Period

85.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Alice M. Dear  
Mailing Address 400 W. 149th Street, Apt. 2

City State Zip Code  
New York NY 10031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
A.M. Dear

Occupation  
Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248606

Amount of Each Receipt this Period

85.00

**SUBTOTAL** of Receipts This Page (optional) .....

420.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Roxanne J. Decyk			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7	
Mailing Address 1300 Connecticut Avenue #800E			<b>Transaction ID:</b> 2242180	
City State Zip Code Washington DC 20036			Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Shell Oil Co.		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Genie Dee			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 23245 Hutchinson Road			<b>Transaction ID:</b> 2250521	
City State Zip Code Los Gatos CA 95033			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Saratoga Area Senior		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Cornelia Dekker			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 6140 Buena Vista Avenue			<b>Transaction ID:</b> 2244504	
City State Zip Code Oakland CA 94618			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Stanford University		Occupation Pediatrician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Virginia C. Dell Mailing Address 454 Grandview Road City Green Bay State WI Zip Code 54311 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2248061</b> Amount of Each Receipt this Period 150.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Daniela Deluca Mailing Address 2866 Pine Street City San Francisco State CA Zip Code 94115 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Painter Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245063</b> Amount of Each Receipt this Period 150.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Ann L. Deluty Mailing Address 51 Birch Hill Rd City Stow State MA Zip Code 01775 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Landscape designer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243346</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Ann L. Deluty

Mailing Address 51 Birch Hill Rd

City State Zip Code  
Stow MA 01775

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Landscape designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245048

Amount of Each Receipt this Period

35.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Emilia L. DeMarco

Mailing Address 273 S. 3rd Street

City State Zip Code  
Philadelphia PA 19106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOW Legal Defense Fund

Occupation  
Public Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241780

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Merry A. Demarest

Mailing Address 6015 NW Rosewood Drive

City State Zip Code  
Corvallis OR 97330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Community Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2240833

Amount of Each Receipt this Period

1300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1585.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Thomas Denhart		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 420 NW 11th Avenue Unit 1205		<b>Transaction ID:</b> 2252204	
City Portland	State OR	Zip Code 97209	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Janice G. Dennis		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 7 Willowbrook Lane		<b>Transaction ID:</b> 2247837	
City Egg Harbor Township	State NJ	Zip Code 08234	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Diane G. DeRocher		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 112 S Locust Street		<b>Transaction ID:</b> 2244292	
City Pontiac	State IL	Zip Code 61764	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

**SUBTOTAL** of Receipts This Page (optional) .....

410.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joy DeSalvo Mailing Address 633 Mansell Drive City Youngstown State OH Zip Code 44505 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 29 / 2007 <b>Transaction ID: 2248063</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Verda M. Deutscher Mailing Address 4740 Connecticut Avenue, NW #1007 City Washington State DC Zip Code 20008 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt MM / DD / YYYY 05 / 29 / 2007 <b>Transaction ID: 2251519</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Joan I Deyoe Mailing Address 6321 Congressional Drive SE City Olympia State WA Zip Code 98513 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 30 / 2007 <b>Transaction ID: 2251848</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Virginia M Diamond Mailing Address 4779 Gainsborough Dr City State Zip Code Fairfax VA 22032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Diamond Insight (self employed) Occupation Consultant/Coach Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250120</b> Amount of Each Receipt this Period 85.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Frances Dibner Mailing Address 8 Powder Horn Hill Rd City State Zip Code Wilton CT 06897 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243289</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Leah D. Dick Mailing Address 4912 Tattershall Way City State Zip Code Lawton OK 73501 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241887</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1185.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sally Dieterich Mailing Address 720 S 10th Street City Laramie State WY Zip Code 82070 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 05 / 22 / 2007 <b>Transaction ID: 2247027</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Betty J Dietrich Mailing Address 274 Kingswood Ct. City Redding State CA Zip Code 96003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00		Date of Receipt MM / DD / YYYY 05 / 08 / 2007 <b>Transaction ID: 2243371</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Margaret S. Dillender Mailing Address 1063 Candlewick Ct City Signal Mtn State TN Zip Code 37377 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 22 / 2007 <b>Transaction ID: 2246723</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Joye Dillman

Mailing Address 705 SW Mies Street

City State Zip Code  
 Pullman WA 99163

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Washington Ste. Univer.

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243303

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Ms. Genevieve Dimmitt

Mailing Address 25485 US Highway 19 N.

City State Zip Code  
 Clearwater FL 33763

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252543

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Mrs. Marguerite Dingman

Mailing Address 43269 N.Y. 37, Box 207

City State Zip Code  
 Redwood NY 13679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243235

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
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(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lois M. DiSanto Mailing Address 1207 South Los Robles Ave City Pasedena State CA Zip Code 91106 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2242814</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn K Ditzen Mailing Address 6400 Ebano Ct. City Citrus Heights State CA Zip Code 95621 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245059</b> Amount of Each Receipt this Period 50.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Kathleen Dixon Mailing Address 1139 Ralph Terrace City Saint Louis State MO Zip Code 63117 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242698</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marylou P. Domino			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 143 Oakwood Road			<b>Transaction ID:</b> 2245140	
City Hopins	State MN	Zip Code 55343	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer none		Occupation full-time mom		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lorna Domke			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 3914 Foxdale Road			<b>Transaction ID:</b> 2246811	
City New Bloomfield	State MO	Zip Code 65063	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer MO Dept. Conservation		Occupation Asst. Public Affairs Div.Chif		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary S Donovan			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 152 Broadway, #8			<b>Transaction ID:</b> 2244258	
City Dobbs Ferry	State NY	Zip Code 10522	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Hunter College		Occupation faculty		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Carol Dorsey			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 108 Eastwind Drive			<b>Transaction ID:</b> 2243547	
City State Zip Code Oxford MS 38655			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Margaret Downes			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address PO Box 22336			<b>Transaction ID:</b> 2248123	
City State Zip Code Carmel CA 93922			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Diane B. Drayson			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 3750 Tremont Lane			<b>Transaction ID:</b> 2242493	
City State Zip Code Ann Arbor MI 48105			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Psychotherapist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00		

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Rabbi Ellen Dreyfus

Mailing Address 1322 W. 190th Street

City State Zip Code  
 Homewood IL 60430

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Congregation Beth Shalom

Occupation  
Rabbi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 7 / 2 0 0 7

Transaction ID: 2251062

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Nancy N Driscoll

Mailing Address 1620 Lombardi Rd.

City State Zip Code  
 Mount Shasta CA 96067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246445

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Mr. David Driver

Mailing Address 2569 Clamstead Road

City State Zip Code  
 Chester VT 05143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Atlantic Allays Inc

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2242008

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Willa H. Drummond Mailing Address 2300 SW 56th Avenue City Gainesville State FL Zip Code 32608 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Univ. of Fl. College of Medicine Occupation Academic Nematologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241940</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Willa H. Drummond Mailing Address 2300 SW 56th Avenue City Gainesville State FL Zip Code 32608 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Univ. of Fl. College of Medicine Occupation Academic Nematologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250912</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Lisa Dubin Mailing Address 983 Park Ave City New York State NY Zip Code 10028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self employed Occupation Architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242098</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Judith E Dubin

Mailing Address 9936 Beverly Grove Drive

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 30 / 2007

Transaction ID: 2251082

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Carolyn Duby

Mailing Address 71 Forsythia Lane

City State Zip Code  
Westport MA 02790

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Professional

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 23 / 2007

Transaction ID: 2247932

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)

Dr. Nancy E. Duckles

Mailing Address 9048 Hemingway Grove Circle

City State Zip Code  
Knoxville TN 37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Children's Anesthesiologi-  
sts, P.C.

Occupation

Anesthesiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 25 / 2007

Transaction ID: 2250768

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lonnie Dunbier Mailing Address 7810 E. Coolidge Street City State Zip Code Scottsdale AZ 85251 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2248124</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Margaret Duncombe Mailing Address 446 Westmark Ave City State Zip Code Colorado Springs CO 80906 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Colorado College Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244921</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sarah Hawley Dunning Mailing Address 9239 Hathaway Street City State Zip Code Dallas TX 75220 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Interior Designer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2244007</b> Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

**3000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Loretta M Durbin Mailing Address 1525 Bates Avenue City Springfield State IL Zip Code 62704 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Government Affairs Specialists, Inc. Occupation state government lobbyist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2249559</b> Amount of Each Receipt this Period 40.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Patricia W. Durbin-Heavey Mailing Address 280 Park View Ter Apt 400 City Oakland State CA Zip Code 94610 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 21 / 2007 <b>Transaction ID: 2246131</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Paula Durlach Mailing Address 3465 Paisley Circle City Orlando State FL Zip Code 32817 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer US Govt. Occupation Research Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 01 / 2007 <b>Transaction ID: 2241245</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

**390.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. June S. Dwyer

Mailing Address 30 5th Avenue, Apt. 16C

City State Zip Code  
 New York NY 10011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Manhattan College

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248034

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Lyndall Dyer

Mailing Address 4209 Stanhope Street

City State Zip Code  
 Dallas TX 75205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248046

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Ms. Ellen C. Eagan

Mailing Address 344 Santa Paula Avenue

City State Zip Code  
 Millbrae CA 94030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCSF

Occupation  
Blood Bank Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251253

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

1290.00

**TOTAL** This Period (last page this line number only) .....



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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Barbara S Earnest

Mailing Address 6 Forest Dale Drive

City State Zip Code  
 Morristown NJ 07960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248322

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Jean A. Ebbert

Mailing Address 9046 Belvoir Woods

City State Zip Code  
 Fort Belvoir VA 22060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

writer/editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248507

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Barbara G. Ebright

Mailing Address 573 Huntley Court

City State Zip Code  
 Bay Village OH 44140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251641

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

305.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. Jacquelynne S. Eccles

Mailing Address 1109 Pearl Street

City State Zip Code  
 Ypsilanti MI 48197

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Univ. of Michigan

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247410

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Susan D. Edelhelt

Mailing Address 9626 SE 34th Street

City State Zip Code  
 Mercer Island WA 98040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252503

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Joyce Edward

Mailing Address 102 Bellhaven Road

City State Zip Code  
 Bellport NY 11713

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Social Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245686

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Vivian Edwards

Mailing Address 10206 W. Wadsworth Road

City State Zip Code  
 Zion IL 60099

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Zion Elementary School

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243368

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Robert Ehrenfeld

Mailing Address 4 Jane St.

City State Zip Code  
 New York NY 10014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Halocarbon Products Corp

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247185

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Elizabeth Ehrenfeld

Mailing Address 4 Jane Street

City State Zip Code  
 New York NY 10014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247427

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Anita Joy Eisenberg

Mailing Address 7763 Glades Road # 1003

City State Zip Code  
 Boca Raton FL 33434

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251533

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Cathie Eitelberg

Mailing Address 2412 Spring Street

City State Zip Code  
 Dunn Loring VA 22027

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Segal Company

Occupation  
Benefits Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240930

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Naomi Eliezer

Mailing Address 2080 Avoncrest Drive

City State Zip Code  
 Rochester Hills MI 48309

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2252020

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Eleanor Elkinton

Mailing Address 307 E. Gowen Avenue

City State Zip Code  
 Philadelphia PA 19119

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250756

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Barbara Elkus

Mailing Address 2925 Legation Street NW

City State Zip Code  
 Washington DC 20015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Saveoureenvironment.org

Occupation

Environmental Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245702

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Elizabeth Ellwood

Mailing Address 233 Medford Leas

City State Zip Code  
 Medford NJ 08055

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252052

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Willard H. Elsbree Mailing Address 209 Grosvenor Street City Athens State OH Zip Code 45701 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246239</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jane A. Emery Mailing Address 1255 Terrace Road City Colorado Springs State CO Zip Code 80904 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241164</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Kathie E. England Mailing Address 500 NW Pacific Grove Drive City Beaverton State OR Zip Code 97006 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Time for Success, Inc. Occupation Professional Organizer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243771</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary L. Engle Mailing Address 610 Elliott Street City Schenectady State NY Zip Code 12302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247498</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Arline B Epstein Mailing Address 1128 Pequot Ave. City Southport State CT Zip Code 06890 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2242161</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. L Erlenmeyer-Kimling Mailing Address 1 Briarwood Lane City Stamford State CT Zip Code 06903 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NYS Psychiatric Institute Occupation Research Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244102</b> Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sue Errington Mailing Address 3200 West Brook Drive City Muncie State IN Zip Code 47304 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Planned Parenthood Occupation Development Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248418</b> Amount of Each Receipt this Period 85.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Stephanie L. Ertel Mailing Address 624 Wheless Avenue City Kerrville State TX Zip Code 78028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Richard R. Ertel, P.C. Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1600.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244188</b> Amount of Each Receipt this Period 150.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Virginia Escher Mailing Address 1200 Mira Mar Avenue # 427 City Medford State OR Zip Code 97504 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243357</b> Amount of Each Receipt this Period 600.00

**SUBTOTAL** of Receipts This Page (optional) .....

835.00

**TOTAL** This Period (last page this line number only) .....



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<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)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard Estey

Mailing Address 738 Washington Street

City State Zip Code  
Craig CO 81625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
R&L BrosamerOccupation  
Grade Setter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	0	7

Transaction ID: 2242093

Amount of Each Receipt this Period

750.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Cynthia Evans

Mailing Address 123 Greenbriar Drive

City State Zip Code  
Wexford PA 15090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medical Center Clinic, PCOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	7

Transaction ID: 2242677

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Shirley M. Evans

Mailing Address 626 Knollwood Village

City State Zip Code  
Southern Pines NC 28387

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	7

Transaction ID: 2246220

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
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(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Margaret B Ewalt Mailing Address 1312Cottonwood Trl City State Zip Code Sarasota FL 34232 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7 <b>Transaction ID: 2243403</b> Amount of Each Receipt this Period 20.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Margaret B Ewalt Mailing Address 1312Cottonwood Trl City State Zip Code Sarasota FL 34232 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250585</b> Amount of Each Receipt this Period 65.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Ruth D. Ewing Mailing Address 13C Rivermead City State Zip Code Petersborough NH 03458 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245266</b> Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) .....**235.00****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

A. Mrs. Mary C. Ewing

Mailing Address P.O. Box 3412

City State Zip Code  
 Darien CT 06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243294

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mrs. Kathy Fackler

Mailing Address 7372 Eads Avenue

City State Zip Code  
 La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CEO NFP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247827

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Ms. Diane G Faissler

Mailing Address 59 Turkey Shore Rd

City State Zip Code  
 Ipswich MA 01938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246871

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Susan Falk Mailing Address 1040 Park Avenue Apt. 14F City New York State NY Zip Code 10028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Diane Von Furstenberg Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt MM / DD / YYYY 05 / 14 / 2007 <b>Transaction ID: 2244555</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Cecile Farber Mailing Address 610 Waring Avenue City Bronx State NY Zip Code 10467 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt MM / DD / YYYY 05 / 24 / 2007 <b>Transaction ID: 2247506</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Katherine G. Farley Mailing Address 520 Madison Avenue 6th Floor City New York City State NY Zip Code 10022 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Tishman Speyer Occupation Realtor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt MM / DD / YYYY 05 / 18 / 2007 <b>Transaction ID: 2245580</b> Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Julia b Farwell-Clay

Mailing Address 203 high st

City State Zip Code  
 newburyprt MA 01950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248028

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Nancy G. Feldman

Mailing Address 3431 E 67 Street

City State Zip Code  
 tulsa OK 74136

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 6 / 2 0 0 7

Transaction ID: 2247608

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Diane Felsen

Mailing Address 45 76th Street

City State Zip Code  
 Brooklyn NY 11209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WMC

Occupation  
Assoc Prof

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244236

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Joan M Ferrante		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 440 Riverside Drive 91		<b>Transaction ID:</b> 2248319	
City State Zip Code New York NY 10027		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Joan M Ferrante		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 440 Riverside Drive 91		<b>Transaction ID:</b> 2251337	
City State Zip Code New York NY 10027		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Kim Ferrarie		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 2226 Welch Street		<b>Transaction ID:</b> 2242471	
City State Zip Code Houston TX 77019		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dell Inc Occupation VP Human Resc			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

370.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gertrude H. Ffolliott			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 442 Summit Avenue Apt. 6			<b>Transaction ID:</b> 2251194	
City State Zip Code Saint Paul MN 55102			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Regions Hospital		Occupation Volunteer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Elizabeth Fink			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 51 Graenest Ridge Road			<b>Transaction ID:</b> 2241725	
City State Zip Code Wilton CT 06897			Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Marshall St. Mgmt		Occupation Co-Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Coleman Finkel			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 2600 Netherland Avenue Apt 702			<b>Transaction ID:</b> 2245920	
City State Zip Code Riverdale NY 10463			Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Self		Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Elizabeth Fischer

Mailing Address 18 Fair Street, Apt. 7

City State Zip Code  
 Guilford CT 06437

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251813

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Martha Fish

Mailing Address 18 Shell Road

City State Zip Code  
 Warren RI 02885

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Massage Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245090

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. B. Ellen Fisher

Mailing Address 5137 S. Kimbark Avenue

City State Zip Code  
 Chicago IL 60615

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Tutor for Children

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252356

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

575.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Susan B. Fisher

Mailing Address P.O. Box 349  
170 West Center Road

City State Zip Code  
West Stockbridge MA 01266

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Museum of Broadcasting

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247115

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Ms. Pam Fleischaker

Mailing Address 821 NW 41st

City State Zip Code  
Oklahoma City OK 73118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241229

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Pam Fleischaker

Mailing Address 821 NW 41st

City State Zip Code  
Oklahoma City OK 73118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252397

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

450.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) H. A. Forbes Mailing Address 38 Arlington Street City State Zip Code Cambridge MA 02140 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247491</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ruth M. Forbis Mailing Address 8404 La Rouche Drive City State Zip Code San Diego CA 92119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245799</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Deborah Ford Mailing Address 1114 Bellemore Rd City State Zip Code Baltimore MD 21210 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Univ of Baltimore Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244937</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Laura D Ford Mailing Address 295 Red Tail Trail City State Zip Code Evergreen CO 80439 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248651</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marcia Forman Mailing Address 72 Sherwood Road City State Zip Code Springfield NJ 07081 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252472</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ella M Forsyth Mailing Address 219 Graham St. City State Zip Code Carlisle PA 17013 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242500</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 516 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Charlotte M. Forsythe

Mailing Address 2854 James Avenue South

City State Zip Code  
Minneapolis MN 55408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Design Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240933

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth R. Foster

Mailing Address 1837 N Orchard Street

City State Zip Code  
Chicago IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240853

Amount of Each Receipt this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Sara S Foszcz

Mailing Address 7301 Burgett Rd

City State Zip Code  
Richmond IL 60071

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
full time volunteer

Occupation  
volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246481

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 517 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mr. Clinton R. Foulk

Mailing Address 843 Cpress Parkway # 403

City State Zip Code  
 Kissimmee FL 34759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241855

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Julie E Fouquet

Mailing Address 48 Hillbrook Drive

City State Zip Code  
 Portola Valley CA 94028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Avago Technologies

Occupation

Research scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2240836

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Ms. Jan Woodward Fox

Mailing Address 1757 Sunset Blvd.

City State Zip Code  
 Houston TX 77005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jan Woodward Fox, PLC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243369

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Lynda K Fox Mailing Address 19630 Juna Lane City State Zip Code Saratoga CA 95070 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247223</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Terry W. Francis Mailing Address 23 Foreman Drive City State Zip Code Glen Carbon IL 62034 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249126</b> Amount of Each Receipt this Period 85.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Suzanne Franke Mailing Address 5511 Riverside Dr City State Zip Code Richmond VA 23225 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation ERA Old Colony Realtor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244305</b> Amount of Each Receipt this Period 250.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		585.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 519 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Nancy Frankel

Mailing Address 7 McAllister Road

City State Zip Code  
Bedford NH 03110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Red Balloon LLC

Occupation  
Training & Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2242050

Amount of Each Receipt this Period

150.00

**B.** Full Name (Last, First, Middle Initial)

Dr. Amy Freedman

Mailing Address 600 Grindan Drive

City State Zip Code  
Yardley PA 19067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aventis

Occupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248947

Amount of Each Receipt this Period

50.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Elaine K. Freeman

Mailing Address 1026 Rolandvue Avenue

City State Zip Code  
Ruxton MD 21204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johns Hopkins

Occupation  
Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241257

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 520 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Cynthia K. Freeman

Mailing Address 4042 Mansion Ct. NW

City State Zip Code  
 Washington DC 20007

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240843

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Nancy Frehling

Mailing Address 421 East San Marino Drive

City State Zip Code  
 Miami Beach FL 33139

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Frehling Enterprises

Occupation  
Merchant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245370

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Barbara Friedberg

Mailing Address 600 West 111th Street

City State Zip Code  
 New York NY 10025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Writer/Freelance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241202

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
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(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Bern Friedelson Mailing Address 103 Brets Rd City State Zip Code Brattleboro VT 05301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246390</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ilona Frieden Mailing Address 811 Paramount Road City State Zip Code Oakland CA 94610 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Univ. of California Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241291</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Iris Friederich Mailing Address 750 Weaver Dairy Road Apt. 2204 City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241781</b> Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 522 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Maureen L. Fries Mailing Address 2305 Cazadero Hwy City Cazadero State CA Zip Code 95421 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 21 / 2007 <b>Transaction ID: 2247821</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Patti P. Frounfelter Mailing Address 125 N. Pansy Street City Ishpeming State MI Zip Code 49849 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation owner/CURVES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt MM / DD / YYYY 05 / 02 / 2007 <b>Transaction ID: 2242044</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Patti P. Frounfelter Mailing Address 125 N. Pansy Street City Ishpeming State MI Zip Code 49849 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation owner/CURVES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt MM / DD / YYYY 05 / 15 / 2007 <b>Transaction ID: 2244207</b> Amount of Each Receipt this Period 15.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		165.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 523 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Patti P. Frounfelter Mailing Address 125 N. Pansy Street City Ishpeming State MI Zip Code 49849 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation owner/CURVES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245394</b> Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Patti P. Frounfelter Mailing Address 125 N. Pansy Street City Ishpeming State MI Zip Code 49849 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation owner/CURVES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251112</b> Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Dawn N. Fudge Mailing Address 313 East Woodland City Houston State TX Zip Code 77009 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244255</b> Amount of Each Receipt this Period 100.00

**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)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Minoru Fukuda			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 2818 Passy Avenue			<b>Transaction ID:</b> 2240842	
City State Zip Code San Diego CA 92122			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Burham Institute		Occupation Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sharon Fulkerson			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 2905 Melmar Park Street			<b>Transaction ID:</b> 2244380	
City State Zip Code Commerce TX 75428			Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer East Texas State Univ		Occupation Career Services Dir.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Aviva Futorian			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 2440 N. Lakeview			<b>Transaction ID:</b> 2251517	
City State Zip Code Chicago IL 60614			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. E Marianne Gabel

Mailing Address 49 Forest Ave.

City State Zip Code  
 Delaware OH 43015

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2251390

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Marilyn Gaddis

Mailing Address 408 Mustang Lane

City State Zip Code  
 San Marcos TX 78666

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252519

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Kathleen M Gadway

Mailing Address 2905 Newbury St.

City State Zip Code  
 Berkeley CA 94703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Berkeley Unified School  
District

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251085

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

4350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Marie Lee Gaillard

Mailing Address P.O. Box 227

City State Zip Code  
 Fishers Isle NY 06390

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245270

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Bronya Galef

Mailing Address 242 Copa de Oro Road

City State Zip Code  
 Los Angeles CA 90077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241848

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Marjorie Galenson

Mailing Address 55 Grasslands Road Apt. B229

City State Zip Code  
 Valhalla NY 10595

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243987

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 527 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Murray Galinson			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 7919 Prospect Place			<b>Transaction ID:</b> 2251088	
City State Zip Code La Jolla CA 92037			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer self Occupation investor		Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Carol W. Galligan			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address Box 247			<b>Transaction ID:</b> 2247935	
City State Zip Code Shelter Island NY 11964			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self Occupation Psychoanalyst		Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. D. H. Galliher			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 182 Old Jewett City Road			<b>Transaction ID:</b> 2249473	
City State Zip Code Preston CT 06365			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation Retired		Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 528 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Diane Gallivan Mailing Address 4339 Squire Heath Road City State Zip Code Portage MI 49024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Dr. Gallivan Inc. Occupation Bookkeeper Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241939</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Deb Gamble Mailing Address 13721 Barrington Ct City State Zip Code Dubuque IA 52003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Area Residential Care Occupation Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250127</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Al Garren Mailing Address 171 Avenida Drive City State Zip Code Berkeley CA 94708 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2247690</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Betty B. Garrett

Mailing Address 109 Alford Court

City State Zip Code  
 Chadds Ford PA 19317

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2242824

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Pamela Garrison

Mailing Address 3824 La Playa Blvd.

City State Zip Code  
 Miami FL 33133

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245365

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Gloria Gary

Mailing Address 5000 2122 SW 25th Blvd.

City State Zip Code  
 Gainesville FL 32608

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246828

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Carole Gaunt

Mailing Address 993 Park Avenue # 1E

City State Zip Code  
 New York NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 7

Transaction ID: 2243558

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Carole Gaunt

Mailing Address 993 Park Avenue # 1E

City State Zip Code  
 New York NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251660

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)

Dr. Kristine M Gebbie

Mailing Address 1825 Riverside Drive # 6B

City State Zip Code  
 New York NY 10034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbia University

Occupation  
Nursing Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245120

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 531 / 963

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jerilyn A. Gelt Mailing Address 1860 Jackson Street Apt. 502 City San Francisco State CA Zip Code 94109 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Public Employment Relati Occupation Labor Relations Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247812</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth H. Geltz Mailing Address 3231 Mount Kuebler Drive S City Salem State OR Zip Code 97302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242376</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary Jane Gentry Mailing Address 680 Eaton Street City Memphis State TN Zip Code 38120 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242639</b> Amount of Each Receipt this Period 100.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Alida Geppert			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 6462 Cadam Wood Drive			<b>Transaction ID:</b> 2241805	
City State Zip Code Kalamazoo MI 49009			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer SW MI Library Coop		Occupation Library Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Erika R Giles			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address PO Box 1534			<b>Transaction ID:</b> 2243534	
City State Zip Code Mercer Island WA 98040			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Writer/Volunteer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Karen Gilmore			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 305 East 18 Street			<b>Transaction ID:</b> 2248561	
City State Zip Code New York NY 10003			Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Psychiatrist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 625.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Laura Ginger

Mailing Address 2983 Ramble Road West

City State Zip Code  
 Bloomington IN 47408

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Indiana University

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248309

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Emily Giske

Mailing Address 440 W 24th St Apt 3

City State Zip Code  
 New York NY 10011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244582

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Edna Glaessel

Mailing Address PO Box 629

City State Zip Code  
 Sugar Hill NH 03586

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241859

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1120.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Edna Glaessel Mailing Address PO Box 629 City State Zip Code Sugar Hill NH 03586 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID:</b> 2250752 Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joan D. Glatthorn, Esq. Mailing Address 6331 Camino de la Costa City State Zip Code La Jolla CA 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID:</b> 2242118 Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Glenn Mailing Address 1108 Cowards Creek Drive City State Zip Code Friendswood TX 77546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID:</b> 2247167 Amount of Each Receipt this Period 200.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Kathleen Louise Glezen  
Mailing Address 6400 Gilbert Lake Road

City State Zip Code  
Bloomfield Hills MI 48301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248566

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Mildred L Glimcher  
Mailing Address 435 East 52nd Street, #24C

City State Zip Code  
New York NY 10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PaceWildenstein

Occupation  
Art Historian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246439

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. C. Globiana  
Mailing Address 24 Woodland Street

City State Zip Code  
Arlington MA 02476

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Fitchburg State College

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250808

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 536 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Vivian K Gluss Mailing Address 95 Breezy Hill Road City State Zip Code Stamford CT 06903 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245119</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Vivian K Gluss Mailing Address 95 Breezy Hill Road City State Zip Code Stamford CT 06903 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252046</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Carol R. Goldberg Mailing Address 225 Franklin Street Suite 2700 City State Zip Code Boston MA 02110 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation The Avcar Group Ltd. Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247288</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jacqueline J. Goldberg Mailing Address 718 Ridge Avenue City Evanston State IL Zip Code 60202 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241333</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Janice L. Goldblum Mailing Address 10501 Wilshire Blvd. Unit 701 City Los Angeles State CA Zip Code 90024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2247176</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. David M. Golden Mailing Address 4 Royal Oak Drive City Clifton Park State NY Zip Code 12065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247576</b> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 538 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Paul Goldenberg Mailing Address 1963 Tomin Road City LaHabra Hts State CA Zip Code 90631 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Paul's TV Occupation Businessman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2242663 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	0	7	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		0	7		2	0	0	7																							
1000.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sharon Goldfarb Mailing Address 7 Stone Hollow Way City Armonk State NY Zip Code 10504 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Geriatric Care Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2245055 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	7		2	0	0	7																							
250.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Margery Goldman Mailing Address 1043 Pine St City Boulder State CO Zip Code 80302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer EYE-D Valld Inc. Occupation Product Design Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243184 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	7	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		0	8		2	0	0	7																							
1000.00																																

SUBTOTAL of Receipts This Page (optional) .....

2250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 539 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Gary L. Goltra

Mailing Address 10414 Stonebank Street

City State Zip Code  
 Bellflower CA 90706

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Building Inspector

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250399

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Gary L. Goltra

Mailing Address 10414 Stonebank Street

City State Zip Code  
 Bellflower CA 90706

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Building Inspector

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251520

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Sarah J. Goodfriend

Mailing Address 1500 W. 24th Street

City State Zip Code  
 Austin TX 78703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 7 / 2 0 0 7

Transaction ID: 2247618

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 540 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Nancy Goodman Mailing Address 6 Evergreen Lane City Larchmont State NY Zip Code 10538 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 05 / 30 / 2007 <b>Transaction ID: 2251179</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Barbara L. Goodridge Mailing Address 556 Camillo Rd City Sierra Madre State CA Zip Code 91024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Southern CA Edison Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 15 / 2007 <b>Transaction ID: 2244781</b> Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sydna H. Gordon Mailing Address 1309 Carriage Lane City Garland State TX Zip Code 75043 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Gay & McCall, Inc. Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 05 / 15 / 2007 <b>Transaction ID: 2244924</b> Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 541 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Susan G. Gordon

Mailing Address 3 Cooper Morris Drive

City State Zip Code  
Pomona NY 10970

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248616

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Judy E. Gordon

Mailing Address 44 Crestline Road

City State Zip Code  
Rochester NY 14618

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251554

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Sarah Gore

Mailing Address 465 Polly Drummond Hill Road

City State Zip Code  
Newark DE 19711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WL Gore and Assoc.

Occupation

Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241079

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

835.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 542 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Steve Gorn			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 72 Cherry Hill Road			<b>Transaction ID:</b> 2247820	
City State Zip Code Accord NY 12404			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Musician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Richard A Gorr			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 50 Glenbrook Road #15E			<b>Transaction ID:</b> 2246472	
City State Zip Code Stamford CT 06902			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Joan P. Gosink			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 24363 Paragon Place			<b>Transaction ID:</b> 2251111	
City State Zip Code Golden CO 80401			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Karen Gottlieb Mailing Address 3700 Hibiscus St City Miami State FL Zip Code 33133 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2249350</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Reyli Graber Mailing Address 178 Basinside Way City Alameda State CA Zip Code 94502 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 02 / 2007 <b>Transaction ID: 2241952</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Agnes M. Grady Mailing Address 31500 33rd Place SW Apt. J201 City Federal Way State WA Zip Code 98023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt MM / DD / YYYY 05 / 18 / 2007 <b>Transaction ID: 2245834</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 544 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Nancy A. Graham Mailing Address 24096 Deep Neck Road Box 87 City State Zip Code Royal Oak MD 21662 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2248159</b> Amount of Each Receipt this Period 35.00
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Halene L. Graves Mailing Address 10 West Ridge Lane City State Zip Code Sheridan WY 82801 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243341</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Shannon Graving Mailing Address 535 N. Longfellow Street City State Zip Code Arlington VA 22203 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Holland & Knight LLP Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247486</b> Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional) .....**315.00****TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Ruth Ru Gray  
Mailing Address 33325 E Lake Joanna Dr

City State Zip Code  
Eustis FL 32736

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243960

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Melanie Gray  
Mailing Address 3718 Inverness Drive

City State Zip Code  
Houston TX 77019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weil Gotshal & Manges LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2244059

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael Green  
Mailing Address 8300 SE 61st Street

City State Zip Code  
Mercer Island WA 98040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245067

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

5350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Michael Green

Mailing Address 8300 SE 61st Street

City State Zip Code  
Mercer Island WA 98040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**REQUESTED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

**Transaction ID: 2251884**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Mary M Greenebaum

Mailing Address 2233 Douglass Blvd

City State Zip Code  
Louisville KY 40205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 KY Author Forum

Occupation  
 Producer/Co-Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

**Transaction ID: 2246273**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Karin Greenfield-Sanders

Mailing Address 44 Cayuga RoadLake Oswawana

City State Zip Code  
Putnam Valley NY 10579

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self

Occupation  
 Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

**Transaction ID: 2251374**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Sally Greenspan

Mailing Address 139 West 19th Street  
Apt. 5NE

City State Zip Code  
New York NY 10011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2240839

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Mary W Greenwald

Mailing Address 10577 Drexton Place

City State Zip Code  
Newburgh IN 47630

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247777

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Fay T Greenwald

Mailing Address 258 Evandale Road

City State Zip Code  
Scarsdale NY 10583

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mercy College

Occupation

Professor of English Lit.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241922

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Nancy Greenwood

Mailing Address 486 N State St

City State Zip Code  
 Concord NH 03301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Nancy Greenwood Smith Ins-  
urance

Occupation  
Insurance Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248510

Amount of Each Receipt this Period

85.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Helen Griffen

Mailing Address 17366 W. Sunset Blvd.  
 Apt. 402B

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247817

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)

Mr. Gerald A. Griffin

Mailing Address 4208 223rd Place SW

City State Zip Code  
 Mountlake Terrace WA 98043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Federal government

Occupation  
Retired civil engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241103

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

835.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Amy S. Gross Mailing Address 1017 N. Phelps Avenue City State Zip Code Winter Park FL 32789 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation TMI Attorney Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 7 <b>Transaction ID: 2246084</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jennifer Gross Mailing Address 12230 205th Street North City State Zip Code Marine on St Croix MN 55047 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3600.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2247165</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Katherine Grossman Mailing Address 140 Ridge Road City State Zip Code Hollis NH 03049 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251510</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Beth Guenther			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 17 Wraggborough Lane			<b>Transaction ID:</b> 2248162	
City State Zip Code Charleston SC 29403			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marie Guerin			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 116 Foxwood Cir			<b>Transaction ID:</b> 2252237	
City State Zip Code Mount Kisco NY 10549			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer IBM Corporation		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Susan Guildford			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 3046 E. Gainsborough Road			<b>Transaction ID:</b> 2242361	
City State Zip Code Orange CA 92869			Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Guilford Skinner Sarvas & C		Occupation Bookkeeper		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1600.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Patrick S. Guillen

Mailing Address 2002 Magnolia Avenue

City State Zip Code  
 Ontario CA 91762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Librerian Del Pueblo Inc

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2252882

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Jodi L. Gunther

Mailing Address 3108 Oak Terrace

City State Zip Code  
 Island Lake IL 60042

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Northwest Comm Hospital

Occupation  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247818

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Jodi L. Gunther

Mailing Address 3108 Oak Terrace

City State Zip Code  
 Island Lake IL 60042

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Northwest Comm Hospital

Occupation  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251845

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Alfred Habeeb

Mailing Address 4304 Fair Oaks Drive

City State Zip Code  
 Birmingham AL 35213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241319

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Alfred Habeeb

Mailing Address 4304 Fair Oaks Drive

City State Zip Code  
 Birmingham AL 35213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246891

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Karen L. Hackett

Mailing Address 110 Bleecker Street, #27D

City State Zip Code  
 New York NY 10012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sun Microsystems

Occupation  
Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 2 / 2 0 0 7

Transaction ID: 2243824

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Dr. Marlene E. Hafner

Mailing Address 11616 Danville Drive

City State Zip Code  
Rockville MD 20852

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FDA

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247505

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Dr. Jeanne L Hafstrom

Mailing Address 1704 Foxborough Ct

City State Zip Code  
Champaign IL 61822

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246447

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Deborah Haight

Mailing Address 700 Newcombe Court

City State Zip Code  
Roseville CA 95661

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Permanente Medical Group

Occupation  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249219

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Karen R. Halderson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 3301 Monroe Street NE Unit N148		<b>Transaction ID:</b> 2251131	
City Albuquerque	State NM	Zip Code 87110	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AK Native Medical Center	Occupation Nutritionist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jeanette M. Hall		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 15 azalea ave		<b>Transaction ID:</b> 2244093	
City Fairfax	State CA	Zip Code 94930	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation Tax accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Timi Hallem		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 617 21st Place		<b>Transaction ID:</b> 2242400	
City Santa Monica	State CA	Zip Code 90402	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Manatt, Phelps & Phillips, LLP	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Roslyn W Halpern		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 7546 SW Aloma Way #1		<b>Transaction ID:</b> 2250572	
City Portland	State OR	Zip Code 97223	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer self 	Occupation ecommerce		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Roslyn W Halpern		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 7546 SW Aloma Way #1		<b>Transaction ID:</b> 2251365	
City Portland	State OR	Zip Code 97223	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer self 	Occupation ecommerce		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Stephen Halpert		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 8004 S.W. 102nd Street		<b>Transaction ID:</b> 2248394	
City Miami	State FL	Zip Code 33156	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self 	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joan Hambrick Mailing Address 1720 Randel Road City Nichols Hills State OK Zip Code 73116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246842</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Ruth F. Hammett Mailing Address 301 Lowell Avenue City Palo Alto State CA Zip Code 94301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251685</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jan Hamrick Mailing Address 170 McKittrick Road City Pelzer State SC Zip Code 29669 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245054</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Lucy McLelland Hand

Mailing Address 3509 E. Bradley Lane

City State Zip Code  
 Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
US House of Representativ-  
es

Occupation  
AA/LD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246252

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Christine Hannon

Mailing Address 97 North Street

City State Zip Code  
 Northampton MA 01060

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Smith College

Occupation  
Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248203

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Kay Harrington

Mailing Address 13335 Mulholland Drive

City State Zip Code  
 Beverly Hills CA 90210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247383

Amount of Each Receipt this Period

750.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 558 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Margaret Harris Mailing Address 228 S. 21st Street City Philadelphia State PA Zip Code 19103 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Volunteer Occupation ESL Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242464</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joann Harris Mailing Address 241 Melba Lane City Highland Park State IL Zip Code 60035 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251712</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Martha Caldwell Harris Mailing Address 6801 Rockledge Dr City Bethesda State MD Zip Code 20817 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State Dept. Occupation Govt. Official Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251664</b> Amount of Each Receipt this Period 250.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 559 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. James S Harris

Mailing Address 763 Esplanada Way

City State Zip Code  
Stanford CA 94305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Stanford University

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251342

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Nancy G. Harter

Mailing Address 201 South Glenwood Avenue

City State Zip Code  
Columbia MO 65203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244205

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Tammie Hartgroves

Mailing Address 822 Country Lane Dr

City State Zip Code  
McGregor TX 76657

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Girling Health Care, Inc

Occupation  
Nurse Practitioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244254

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 560 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Hollister Hartman Mailing Address 7708 Random Run Ln City Falls Church State VA Zip Code 22042 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer VDO Car Communication Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248994</b> Amount of Each Receipt this Period 85.00
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Mary J. Hayden Mailing Address 194 Sequoia Drive City Pasadena State CA Zip Code 91105 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241129</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Lillian Hayes Mailing Address 190 South 300 East City Provo State UT Zip Code 84606 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250994</b> Amount of Each Receipt this Period 500.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		835.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Audrey M. Hayes

Mailing Address 223 Laws Brook Rd Apt 209

City State Zip Code  
 Concord MA 01742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244918

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Ann Hayes

Mailing Address 8524 Valmont Rd

City State Zip Code  
 Boulder CO 80301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251120

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Stephanie Hayutin

Mailing Address 745 25th Street

City State Zip Code  
 Santa Monica CA 90402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Clinical Nurse Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247784

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 562 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Eloise K Healy

Mailing Address 4350 Allott Ave.

City State Zip Code  
 Sherman Oaks CA 91423

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
writer/educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247501

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Josephine W Heath

Mailing Address 2455 Vassar Dr

City State Zip Code  
 Boulder CO 80305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Community Foundation

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245101

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ann F. Hecht

Mailing Address 1152 Laurel St.

City State Zip Code  
 Berkeley CA 94708

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251345

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 563 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Nancy C Heffernan

Mailing Address 38 Low Road

City State Zip Code  
 Hanover NH 03755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
writer/lecturer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244224

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Leslie Hefner

Mailing Address 424 Little Lake Drive  
 Apt. 33

City State Zip Code  
 Ann Arbor MI 48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251928

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)

Mr. Steve Hegeman

Mailing Address PO Box 367

City State Zip Code  
 Bonita Springs FL 34133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242232

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 564 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Stephanie Hein

Mailing Address 1761 Havenhurst Drive

City State Zip Code  
 Los Altos CA 94024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
At Home Mom

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245713

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Anne M Heinz

Mailing Address 525 Judson Avenue

City State Zip Code  
 Evanston IL 60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Chicago Hos-  
pitals

Occupation  
Academic Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244874

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Jacqueline A Heinze

Mailing Address W10105 Highway 127

City State Zip Code  
 Portage WI 53901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243284

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 565 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Lisa Helling

Mailing Address Unit 3502

City State Zip Code  
 APO AA 34030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Department of State

Occupation  
Foreign Service Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242348

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Ruth M. Hemming

Mailing Address 411 Tico Road

City State Zip Code  
 Ojai CA 93023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
College Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242629

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Ms. Marjorie H. Henderson

Mailing Address 116 Shipherd Circle

City State Zip Code  
 Oberlin OH 44074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oberlin College

Occupation  
Cataloger

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251826

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 566 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Kathryn M. Henkens		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 6 Princeton Road		Transaction ID: 2244247
City Menlo Park	State CA	Amount of Each Receipt this Period 250.00
Zip Code 94025		
FEC ID number of contributing federal political committee. C		
Name of Employer Self employed	Occupation Financial Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Susan Henneman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 10702 Montgomery Drive		Transaction ID: 2245659
City Manassas	State VA	Amount of Each Receipt this Period 250.00
Zip Code 20111		
FEC ID number of contributing federal political committee. C		
Name of Employer Lockheed Martin	Occupation Systems Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Robert R. Henry		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 480 Saxony Road		Transaction ID: 2246873
City Encinitas	State CA	Amount of Each Receipt this Period 50.00
Zip Code 92024		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		550.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 567 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Catherine Henson			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 2500 Peachtree Road NW #702N			<b>Transaction ID:</b> 2243627	
City Atlanta State GA Zip Code 30305			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self-employed		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Louis Hering			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 2500 Virginia Ave NW Apt. 302-S			<b>Transaction ID:</b> 2250810	
City Washington State DC Zip Code 20037			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Herman			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 468 N Flores St			<b>Transaction ID:</b> 2251190	
City Los Angeles State CA Zip Code 90048			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer UCLA		Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gloria T. Hern Mailing Address 7447 Sylmar Avenue City Van Nuys State CA Zip Code 91405 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244890</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mollie K Heron Mailing Address 2929 Four Pines Dr City Lexington State KY Zip Code 40502 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Volunteer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2244003</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Len A. Herzenberg Mailing Address Genetics Dept. Stanford City Stanford State CA Zip Code 94305 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246429</b> Amount of Each Receipt this Period 250.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 569 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Muriel Hess Mailing Address 1510 Pelican Point Drive Apt. BA168 City Sarasota State FL Zip Code 34231 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2252019</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Diane L-S Hewat Mailing Address P.O. Box 609 119 Selleck Hill Road City Salisbury State CT Zip Code 06068 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246409</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Helene Hibbard Mailing Address 16 Guildswood City Tuscaloosa State AL Zip Code 35401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243962</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 570 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Helene Hibbard Mailing Address 16 Guildswood City Tuscaloosa State AL Zip Code 35401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247401</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Cheryl L. Hiipakka Mailing Address 5487 S. Cornell Avenue City Chicago State IL Zip Code 60615 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 251.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251831</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Eugene A. Hildreth Mailing Address 2000 Cambridge Avenue Apt. 129 City Wyomissing State PA Zip Code 19610 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241349</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Eugene A. Hildreth Mailing Address 2000 Cambridge Avenue Apt. 129 City State Zip Code Wyomissing PA 19610 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246236</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Karen Hiller Mailing Address 1018 SW Lane Street City State Zip Code Topeka KS 66604 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252462</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Joyce G. Hilty Mailing Address 2881 Lagrange Circle City State Zip Code Boulder CO 80305 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241231</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 572 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Joyce G. Hilty

Mailing Address 2881 Lagrange Circle

City State Zip Code  
 Boulder CO 80305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250915

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Mrs. Roger E. Hinderer

Mailing Address 4801 N Hills Blvd Apt 306

City State Zip Code  
 N Little Rock AR 72116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244943

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)

Ms. Dorothy S. Hines

Mailing Address P.O. Box 274

City State Zip Code  
 Warren VT 05674

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241329

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 573 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Dorothy S. Hines

Mailing Address P.O. Box 274

City State Zip Code  
 Warren VT 05674

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246342

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Sue N. Hinrichs

Mailing Address 19200 Jack Tone Road

City State Zip Code  
 Manteca CA 95336

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251216

Amount of Each Receipt this Period

200.00

**C.** Full Name (Last, First, Middle Initial)

Mr. John L. Hjelt

Mailing Address 870 Blackberry Lane

City State Zip Code  
 Ashland OR 97520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246206

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 574 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Nancy R. Hodges Mailing Address 975 N Shawn Avenue City State Zip Code Oak Harbor WA 98277 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt MM / DD / YYYY 05 / 17 / 2007 <b>Transaction ID: 2245023</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mary Alice Hoffman Mailing Address 1428 Johnnys Way City State Zip Code West Chester PA 19382 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2249649</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Lisa R. Hofheimer Mailing Address 177 N. Citrus Avenue City State Zip Code Los Angeles CA 90036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 23 / 2007 <b>Transaction ID: 2247923</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 575 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Janet Hofmann Mailing Address 3889 Harvest Drive City State Zip Code Redwood City CA 94061 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241873</b> Amount of Each Receipt this Period 150.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Janet Hofmann Mailing Address 3889 Harvest Drive City State Zip Code Redwood City CA 94061 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250864</b> Amount of Each Receipt this Period 150.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Janet Hofmann Mailing Address 3889 Harvest Drive City State Zip Code Redwood City CA 94061 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251868</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Peggy S. Holman

Mailing Address 15347 SE 49th Place

City State Zip Code  
 Bellevue WA 98006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Open Circle Company

Occupation  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251098

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Durwood P Holmes

Mailing Address 1956 NC 111 South

City State Zip Code  
 Goldsboro NC 27534

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251122

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Judy Holston

Mailing Address 1158 26th Street # 643  
 JRH #205-S LLC

City State Zip Code  
 Santa Monica CA 90403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246773

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 577 / 963

(check only one)

<input checked="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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary B. Holt		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 18616 N. 99th Avenue # 2027		Transaction ID: 2241228	
City Sun City	State AZ	Zip Code 85373	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mary B. Holt		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 18616 N. 99th Avenue # 2027		Transaction ID: 2245946	
City Sun City	State AZ	Zip Code 85373	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jenny Holzer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 80 Hewitts Road		Transaction ID: 2251334	
City Hoosick Falls	State NY	Zip Code 12090	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		1150.00	
<b>TOTAL</b> This Period (last page this line number only) .....			

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Eleanor Hood Mailing Address 621 W. Woodway Avenue City State Zip Code Spokane WA 99218 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241148</b> Amount of Each Receipt this Period 250.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lee Hooker Mailing Address 55 Spring Lane City State Zip Code Tiburon CA 94920 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245085</b> Amount of Each Receipt this Period 250.00
Name of Employer Occupation Self Artist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Thomas Hooton Mailing Address 425 Bianca Avenue City State Zip Code Miami FL 33146 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243103</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		600.00
<b>TOTAL</b> This Period (last page this line number only) .....		

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 579 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Kimberly H. Hoover Mailing Address 1761 Church Street NW City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer City Influence Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2247187</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Janice Hope Mailing Address 2900 Thomas Avenue #2316 City Minneapolis State MN Zip Code 55416 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243597</b> Amount of Each Receipt this Period 2500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jackie C. Horne Mailing Address 8 Harris Street City Cambridge State MA Zip Code 02140 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Brandeis University Occupation Grad Student Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245035</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 580 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Margarita Horner		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 2705 Mountain View Drive # 222		<b>Transaction ID:</b> 2242369
City State Zip Code La Verne CA 91750	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Margarita Horner		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 2705 Mountain View Drive # 222		<b>Transaction ID:</b> 2247437
City State Zip Code La Verne CA 91750	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Ann Hoven		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 16428 84th Avenue North		<b>Transaction ID:</b> 2246770
City State Zip Code Maple Grove MN 55311	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		900.00
<b>TOTAL</b> This Period (last page this line number only) .....		

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 581 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Julianne R Howell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 1414 22nd St., NW #56		<b>Transaction ID:</b> 2251290	
City Washington	State DC	Zip Code 20037	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Health policy consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1550.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jeanne Huber		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 5341 Cove-Garden Road		<b>Transaction ID:</b> 2244058	
City Coveseville	State VA	Zip Code 22931	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Allergist Ltd	Occupation Bookkeeper		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Patricia A. Hudgins		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 3833 Byrnwyck Place, N.E.		<b>Transaction ID:</b> 2247121	
City Atlanta	State GA	Zip Code 30319	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Emory University	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 582 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Shirley A. Huelsmann

Mailing Address 88 Thompson Avenue

City State Zip Code  
 Covington KY 41017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244514

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Leigh Ann Hughes

Mailing Address 126 Clinton Avenue

City State Zip Code  
 Oak Park IL 60302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Comcast

Occupation  
Area Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244184

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Katherine Hughes

Mailing Address 6227 204th Drive NE

City State Zip Code  
 Redmond WA 98053

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247500

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 583 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Kim Hunter Mailing Address 1451 Edmund Avenue City State Zip Code Saint Paul MN 55104 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 23 / 2007 <b>Transaction ID: 2247916</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth H. Hunter Mailing Address 310 W 79th Street Apt. 11W City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 25 / 2007 <b>Transaction ID: 2250853</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Gale Anne Hurd Mailing Address 8530 Wilshire Boulevard Suite 400 City State Zip Code Beverly Hills CA 90211 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Pacific Western Productions Occupation Film Producer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 05 / 31 / 2007 <b>Transaction ID: 2252515</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Nancy M. Hurley

Mailing Address 3116 Gracefield Road, # 214

City State Zip Code  
 Silver Spring MD 20904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246421

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Margaret H Huyck, Ph.D.

Mailing Address 1718 E. 55th Street

City State Zip Code  
 Chicago IL 60615

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Illinois Institute of Tec-  
 hnology

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 6 / 2 0 0 7

Transaction ID: 2247622

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Mrs. Betty Innis

Mailing Address 585 Sunny Glen Court

City State Zip Code  
 Woodland Park CO 80863

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251887

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 585 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marjorie Isaac Mailing Address 1 Stoneleigh City State Zip Code Bronxville NY 10708 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 22 / 2007 <b>Transaction ID: 2246820</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marjorie S. Isaac Mailing Address PO Box 456 City State Zip Code Tuckahoe NY 10707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 02 / 2007 <b>Transaction ID: 2241842</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Alfred G. Jackson Mailing Address 210 East 18th Street City State Zip Code New York NY 10003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID: 2243762</b> Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Jeremy Jackson

Mailing Address 560 Fern Gln

City State Zip Code  
 La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250053

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Andrea Jackson

Mailing Address 568 Bedford Avenue

City State Zip Code  
 Saint Louis MO 63130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241945

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Cornelia D. Jahncke

Mailing Address 125 W. Lyon Farm Drive

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248031

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Christine Jahnke Mailing Address 5726 MacArthur Blvd NW City Washington State DC Zip Code 20016 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Positive Communications Occupation Trainer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2245272</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marjorie E James Mailing Address 14416 Tanglewood Dr. City Farmers Branch State TX Zip Code 75234 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt MM / DD / YYYY 05 / 09 / 2007 <b>Transaction ID: 2243552</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Loralene James Mailing Address 3335 Childs Road City Lake Oswego State OR Zip Code 97034 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Bookkeeper Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt MM / DD / YYYY 05 / 29 / 2007 <b>Transaction ID: 2248041</b> Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 588 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roger O Jeanty  
Mailing Address 86 Hunting Lane

City State Zip Code  
Sherborn MA 01770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
- self -

Occupation  
garden design

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244778

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sheila Jefferson  
Mailing Address 10634 Holman Avenue, # 4

City State Zip Code  
Los Angeles CA 90024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hookstratten & Hookstratt-  
en

Occupation  
Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246276

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marguerite Jehle  
Mailing Address 4717 Collinos Way

City State Zip Code  
Oceanside CA 92056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242682

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 589 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Marguerite Jehle  
Mailing Address 4717 Collinos Way

City State Zip Code  
Oceanside CA 92056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251497

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Sharon Rae Jenkins  
Mailing Address 301 Coronado Dr Apt 1004

City State Zip Code  
Denton TX 76209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of North Texas

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242113

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marla D Jensen  
Mailing Address 1615 Bittern Court

City State Zip Code  
Carlsbad CA 92011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247205

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 590 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Jensen Mailing Address 3 Woodlawn Place City Clinton State NY Zip Code 13323 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hamilton College Occupation College Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2248215</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mary R. Jewell Mailing Address 57 Cowper Avenue City Kensington State CA Zip Code 94707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244287</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sylvia J. Johanns Mailing Address 528 Mission Santa Fe Circle City Chico State CA Zip Code 95926 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246995</b> Amount of Each Receipt this Period 50.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Penelope Johnson

Mailing Address 112 Wilson Way

City State Zip Code  
American Canyon CA 94503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251806

Amount of Each Receipt this Period

150.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Matthew Johnson

Mailing Address 123 N. Happy Hollow blvd.

City State Zip Code  
Omaha NE 68132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245444

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Judith Johnson

Mailing Address 24 Oak Shadows Court

City State Zip Code  
Catonsville MD 21228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA

Occupation  
MICROBIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247742

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Alwyn N. Johnson Mailing Address 4601 Rue Belle Mer City Sanibel State FL Zip Code 33957 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 925.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2242844</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Alwyn N. Johnson Mailing Address 4601 Rue Belle Mer City Sanibel State FL Zip Code 33957 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 925.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244118</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Alwyn N. Johnson Mailing Address 4601 Rue Belle Mer City Sanibel State FL Zip Code 33957 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 925.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246516</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 593 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Beverly D. Johnson

Mailing Address 683 N. Kalaheo

City State Zip Code  
 Kailua HI 96734

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2244588

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Mary Johnston

Mailing Address P.O. Box 128

City State Zip Code  
 Crestone CO 81131

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243967

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Lily A. Jones

Mailing Address 1311 Cadieux Road

City State Zip Code  
 Grosse Pointe Park MI 48230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248632

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Estelle C. Jones Mailing Address 3 Stanwich Lane City State Zip Code Greenwich CT 06830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244279</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Estelle C. Jones Mailing Address 3 Stanwich Lane City State Zip Code Greenwich CT 06830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251846</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Lenore H. Jones Mailing Address 3465 Kenneth Drive City State Zip Code Palo Alto CA 94303 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation OCLC manager, software development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246418</b> Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 595 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Kenneth Malcolm Jones Mailing Address PO Box 45 City State Zip Code West Tisbury MA 02575 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Transaction ID: 2244540 Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. David W. Joseph Mailing Address 424 N. 73rd City State Zip Code Lincoln NE 68505 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 Transaction ID: 2244501 Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Luana Josvold Mailing Address P.O. Box 100 City State Zip Code Mattapoisett MA 02739 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Musician Translator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 Transaction ID: 2246867 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 596 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mr. Jeremy G. Judge

Mailing Address PO Box 145

City State Zip Code  
 Roxbury CT 06783

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247801

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

Mr. Barry I Judis

Mailing Address 4201 Hayvenhurst Dr

City State Zip Code  
 Encino CA 91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
All California Funding

Occupation

Mortgage Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245133

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Ms. Laurie S. Kahn

Mailing Address 92 Overlake Park

City State Zip Code  
 Burlington VT 05401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243187

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gerri Kahnweiler Mailing Address 1070 Westmoor Road City Winnetka State IL Zip Code 60093 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker/Activist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 05 / 31 / 2007 <b>Transaction ID: 2252048</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Julia G. Kahrl Mailing Address 98 Fisher Eddy Rd City Arrowsic State ME Zip Code 04530 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID: 2244006</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Joyce Ellen Kaiser Mailing Address 2 Grove Isle Drive 1809 City Coconut Grove State FL Zip Code 33133 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Artist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2245364</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Glad Kaletta Mailing Address 4730 W 77th Street City State Zip Code Prairie Vlg KS 66208 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2248737</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Elma L. Kanefield Mailing Address 150 Columbus Avenue Apt. 24D City State Zip Code New York NY 10023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Psychotherapist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt MM / DD / YYYY 05 / 23 / 2007 <b>Transaction ID: 2248168</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Betsy H. Kaplan Mailing Address 200 SW 21st Rd City State Zip Code Miami FL 33129 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Dade County School Board Member Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 25 / 2007 <b>Transaction ID: 2250659</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 599 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Dr. Henry C. Kapteyn  
Mailing Address 3509 Kirkwood Pl

City State Zip Code  
Boulder CO 80304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Colorado

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241918

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Ann B. Karbach  
Mailing Address 15 Trail View

City State Zip Code  
New Braunfels TX 78130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243949

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Tina M Karelson  
Mailing Address 5179 Saint Imier Drive

City State Zip Code  
Fridley MN 55421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self-employed

Occupation  
creative director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244091

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 600 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Marvin Karno Mailing Address 4836 Oak Park Avenue City Encino State CA Zip Code 91316 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248242</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ann Kaslow Mailing Address 1025 E 16th Street City Brooklyn State NY Zip Code 11230 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248569</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Teresa A Kastens Mailing Address 808 NW 40th City Oklahoma City State OK Zip Code 73118 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer OKC Gyn & OB LLC Occupation physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247525</b> Amount of Each Receipt this Period 500.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Carole Kasworm Mailing Address 3212 Bentwillow Drive City Fuquay Varina State NC Zip Code 27526 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242660</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Rosalind F. Kaufman Mailing Address 119 Haviland Road City Harrison State NY Zip Code 10528 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Jacob Fuchsberg Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245918</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Julia A. Kaufmann Mailing Address 100 Memorial Drive, Apt. 5-4A City Cambridge State MA Zip Code 02142 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245045</b> Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Pamela J Kedderis Mailing Address 42 Northwoods Road City Farmington State CT Zip Code 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 7 <b>Transaction ID: 2247626</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mary Keenan Mailing Address 1820 Georgetta Drive City San Jose State CA Zip Code 95125 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Finace Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246881</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. MaryAnn Keenan Mailing Address 233 South 6th Street # 2301 City Philadelphia State PA Zip Code 19106 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Orthopaedic Surgeon Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251284</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 603 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Suzanne Keith Mailing Address 120 Northgate Drive City Woodside State CA Zip Code 94062 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Investments Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251301</b> Amount of Each Receipt this Period 2500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ellen M. Kemp Mailing Address 184 Clover Lane City Princeton State NJ Zip Code 08540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Princeton Univ Occupation Systems Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243770</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Patricia Keane Kennedy Mailing Address 18 Dundee Circle City Harwich State MA Zip Code 02645 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer South Bay Mental Health Center Occupation Mental Health Counsellor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251143</b> Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) .....

2800.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Linda Ketelaar Mailing Address 224 Cureton Street City Greenville State SC Zip Code 29605 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Ahold Info Svcs Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243288</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Claire Keyes Mailing Address 408 Glen Arden Drive City Pittsburgh State PA Zip Code 15208 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Allen Reprod. Health Center Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2247034</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Nicole C Kibert Mailing Address 207 West Genesee Street City Tampa State FL Zip Code 33603 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Carlton Fields Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252050</b> Amount of Each Receipt this Period 250.00

**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)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Joyce A. Kidd

Mailing Address 9982 Reevesbury Drive

City State Zip Code  
 Beverly Hills CA 90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244219

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Ms. Jeanie Kilgour

Mailing Address 6727 Woodcreek Road

City State Zip Code  
 Charlevoix MI 49720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249540

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Ms. Francine Kim

Mailing Address 1444 N Orleans St Apt 6K

City State Zip Code  
 Chicago IL 60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UT Medical Group

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241086

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Virginia King Mailing Address 5950 N Fountains Avenue Apt. 10101 City Tucson State AZ Zip Code 85704 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250985</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Virginia King Mailing Address 5950 N Fountains Avenue Apt. 10101 City Tucson State AZ Zip Code 85704 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252534</b> Amount of Each Receipt this Period 15.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Janet C. Kireker Mailing Address P.O. Box 128 City Ho Ho Kus State NJ Zip Code 07423 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2248069</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1115.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Tracy L Kirkman-Liff

Mailing Address 1927 E. Ranch Rd.

City State Zip Code  
 Tempe AZ 85284

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Health Planning consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240928

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

Ms. Jennie Kixmiller

Mailing Address 1678 8th Avenue

City State Zip Code  
 Brooklyn NY 11215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248859

Amount of Each Receipt this Period

85.00

C. Full Name (Last, First, Middle Initial)

Dr. Enid V Klauber

Mailing Address 17857 Arbor Greene DR

City State Zip Code  
 Tampa FL 33647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
bay area infectious disea-  
se associates

Occupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244235

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1335.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Justice Conrad Lee Klein

Mailing Address 14095 Roblar Road

City State Zip Code  
 Sherman Oaks CA 91423

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hughes Trust

Occupation  
Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244899

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Verra Klunkert

Mailing Address 624 W. Terrylynn Place

City State Zip Code  
 Long Beach CA 90807

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247028

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Marily Knieriemen

Mailing Address 2440 Ouagadougou Place

City State Zip Code  
 Dulles VA 20189

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Peace Corps

Occupation  
County Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244889

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Kathleen B. Knobe Mailing Address 73 Langdon St City Cambridge State MA Zip Code 02138 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Computer Scientist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2240846</b> Amount of Each Receipt this Period 2000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Karen L. Knopper Mailing Address 255 Greenwood Street City Birmingham State MI Zip Code 48009 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245815</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Sara Jo Kobacker Mailing Address 17963 Lake Estate Drive City Boca Raton State FL Zip Code 33496 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244735</b> Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) .....

3250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Ruth S. Koch  
Mailing Address 385 Springdale Street

City State Zip Code  
Athens GA 30606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247811

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jerome Kohlberg  
Mailing Address 115 Crow Hill Road

City State Zip Code  
Mount Kisco NY 10549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243100

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Nancy Kosobud  
Mailing Address 1137 West Oakdale Avenue

City State Zip Code  
Chicago IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bank Popular N.America

Occupation

Commercial Lender

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2244031

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Lynn A. Kotzen

Mailing Address 2 Indian Hill

City State Zip Code  
 New Rochelle NY 10804

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245914

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)

Mrs. Joan C. Koven

Mailing Address P.O. Box 340

City State Zip Code  
 Bridgewater CT 06752

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245029

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)

Mrs. Betty P. Kowaloff

Mailing Address 1261 Madison Avenue  
 3 South

City State Zip Code  
 New York NY 10128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Interior Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249150

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Dr. Leslie Kramer  
Mailing Address 411 Thenth Street SE

City State Zip Code  
Ceder Rapids IA 52403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dermatologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246822

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Diane A. Kreisher  
Mailing Address 711 S. Water Street

City State Zip Code  
Crawfordsville IN 47933

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CVS

Occupation  
Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252386

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Julia A. Kriss  
Mailing Address 5307 Woodland Estat

City State Zip Code  
Springfield VA 22151

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McEanearney Associates

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249591

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 613 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Ellen B. Kritzman  
Mailing Address 10710 SW Cowan Rd

City State Zip Code  
Vashon WA 98070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243673

Amount of Each Receipt this Period

150.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Robin Krivanek  
Mailing Address 3016 Turtle Gait Lane

City State Zip Code  
Sanibel FL 33957

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246734

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Tina Kroot-Jeffkroot  
Mailing Address 222 Crescent Road

City State Zip Code  
San Anselmo CA 94960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241908

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 614 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Martha W. Kropf Mailing Address 3022 Clay Street City San Francisco State CA Zip Code 94115 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2244274 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	0	7	200.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	5		2	0	0	7																							
200.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Kathryn Kuehl Mailing Address 3400 Sullivan Court Apt. 175 City Modesto State CA Zip Code 95356 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer California Department of Corrections Occupation Personnel Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2248429 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	7	30.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	6		2	0	0	7																							
30.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Connie A Kuncicky Mailing Address 228 Cedar Ridge Circle City St. Augustine State FL Zip Code 32080 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2244133 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	7	25.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	4		2	0	0	7																							
25.00																																

SUBTOTAL of Receipts This Page (optional) .....

255.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 615 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Luann Kurnick Mailing Address 4206 Pascal Place City Palos Verdes State CA Zip Code 90274 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2244019</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Cathryn H. Kurtagh Mailing Address 15091 Ford Road #503 Bridgeside Road City Dearborn State MI Zip Code 48126 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246998</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Rhonda La Hue - Mordy Mailing Address 713 Sturbridge Drive City Bryn Mawr State PA Zip Code 19010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250820</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 616 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Bernice Lacks

Mailing Address 1598 Tollhouse Lane

City State Zip Code  
 Clovis CA 93611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248916

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Jeffrey C. Lamkin

Mailing Address 2963 Hudson Aurora Road

City State Zip Code  
 Hudson OH 44236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio Retina Associates

Occupation

Ophthalmologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250316

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Margaret Land

Mailing Address 778 W Bellevue Avenue

City State Zip Code  
 Porterville CA 93257

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250543

Amount of Each Receipt this Period

15.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 617 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Mary Landis

Mailing Address 508 W. Locust Street

City State Zip Code  
 Polo IL 61064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246986

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)

Ms. Amy Lansky

Mailing Address 4119 Alpine Road

City State Zip Code  
 Portola Vally CA 94028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247343

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Mrs. Gail A. Lanznar

Mailing Address 1019 Ashland Avenue

City State Zip Code  
 Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252320

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 618 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Jennifer Lapine

Mailing Address 171 Hardesty Road

City State Zip Code  
 Stamford CT 06903

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251459

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Mr. E. Richard Larson

Mailing Address 3370 Deronda Drive

City State Zip Code  
 Los Angeles CA 90068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248428

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Alice Lassally

Mailing Address 1121 Loma Vista Drive

City State Zip Code  
 Beverly Hills CA 90210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241287

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 619 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jonathan Laverick Mailing Address 24 2nd Avenue City Chula Vista State CA Zip Code 91910 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245935</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Frances Reiner Lax Mailing Address 185 Medford Leas City Medford State NJ Zip Code 08055 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246996</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Lowell Leake Mailing Address 1692 Towerwoods Dr City Cincinnati State OH Zip Code 45224 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer U of Cincinnati Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250959</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 620 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Shirley E. Leary

Mailing Address 10313 40th Avenue NE

City State Zip Code  
 Seattle WA 98125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245717

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Susan B. Leavitt

Mailing Address 23 University Lane

City State Zip Code  
 Manchester MA 01944

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246662

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Jessica L. Ledbetter

Mailing Address 575 State Highway 88

City State Zip Code  
 Gardnerville NV 89460

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation

Agriculture

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 3 / 2 0 0 7

Transaction ID: 2243764

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 621 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Donna Leet Mailing Address 5809 Woodcreek Ln City Middleton State WI Zip Code 53562 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249369</b> Amount of Each Receipt this Period 75.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Eileen LeFort Mailing Address 860 Saddlewood Drive City Glen Ellyn State IL Zip Code 60137 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245533</b> Amount of Each Receipt this Period 200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Caroline L. LeGette Mailing Address 1510 Harbor Ct City Fort Myers State FL Zip Code 33908 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251506</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 622 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Priscilla M. Leith Mailing Address 162 Islington Road City State Zip Code Newton MA 02466 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Accountant & Tax Preparer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 Transaction ID: 2241218 Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Mary C Lellouche Mailing Address 18510 66th Avenue Northeast City State Zip Code Kenmore WA 98028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 Transaction ID: 2249861 Amount of Each Receipt this Period 65.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Anita Lenz Mailing Address 121 Lynthwaite Farm Lane City State Zip Code Wilmington DE 19803 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 Transaction ID: 2250396 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) .....

365.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 623 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Karen M. Leonard

Mailing Address 323 Mill Street

City State Zip Code  
 Saint Paul MN 55102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Towers Perrin

Occupation  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246771

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Mrs. Joanne R Leonard

Mailing Address 483 Santa Monica

City State Zip Code  
 San Leandro CA 94579

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
West Masonry

Occupation  
Office Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243270

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)

Mrs. Joanne R Leonard

Mailing Address 483 Santa Monica

City State Zip Code  
 San Leandro CA 94579

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
West Masonry

Occupation  
Office Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244249

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 624 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Paul Lerman Mailing Address 413 West Englewood Avenue City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2247074</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Catharina D. Lester Mailing Address 96 Kendal Drive City State Zip Code Oberlin OH 44074 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243668</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Catharina D. Lester Mailing Address 96 Kendal Drive City State Zip Code Oberlin OH 44074 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247775</b> Amount of Each Receipt this Period 50.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 625 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sue E Leurgans  
Mailing Address 305 N. Harvey Ave

City State Zip Code  
Oak Park IL 60302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Rush University Medical  
Center

Occupation  
statistician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241285

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Martha Lever  
Mailing Address 1A Exum Drive

City State Zip Code  
West Columbia SC 29169

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247765

Amount of Each Receipt this Period

50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Rita Levien  
Mailing Address 7720 Rockford Road

City State Zip Code  
Boynton Beach FL 33437

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244779

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 626 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Carolyn S Levin

Mailing Address 180 E. Pearson St. # 5107

City State Zip Code  
 Chicago IL 60611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247203

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Shellie Sachs Levin

Mailing Address 22800 SW 157th Avenue

City State Zip Code  
 Miami FL 33170

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Attorney/Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 7

Transaction ID: 2243397

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Mrs. Marilyn B. Levin

Mailing Address 8720 West Flamingo Road  
 Apt. 126 Heritage Club

City State Zip Code  
 Las Vegas NV 89147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248052

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

2850.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 627 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Linda Hirst Levine Mailing Address 6296 Fleecydale Rd Box 234 City Carversville State PA Zip Code 18913 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251099</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Daniella Levine Cava Mailing Address 860 Jeronimo Drive City Coral Gables State FL Zip Code 33146 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7 <b>Transaction ID: 2243398</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Annemarie Levitt Mailing Address 10 East 82nd Street City New York State NY Zip Code 10028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241993</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 628 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Annemarie Levitt  
Mailing Address 10 East 82nd Street

City State Zip Code  
New York NY 10028

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CS KANSAS CITY CORP

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248173

Amount of Each Receipt this Period

75.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Arlene M. Levy  
Mailing Address 111 Fairview Avenue

City State Zip Code  
Capitola CA 95010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240850

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Peachy Levy  
Mailing Address 500 E. Channel Road

City State Zip Code  
Santa Monica CA 90402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242712

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3075.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 629 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Ida Lewenstein

Mailing Address 1 Baldwin Ave Apt 420

City State Zip Code  
San Mateo CA 94401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**REQUESTED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 30 2007

**Transaction ID: 2252024**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Emily M. Lewis

Mailing Address 7316 Rockwood Rd

City State Zip Code  
Little Rock AR 72207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**REQUESTED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
05 30 2007

**Transaction ID: 2251954**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Sharon Lewis

Mailing Address 8842 San Badger Way

City State Zip Code  
Elk Grove CA 95624

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Lodi USD

Occupation  
**Psychologist**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 17 2007

**Transaction ID: 2245509**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 630 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard Lieber  
Mailing Address 11100 Springmall Rd.

City State Zip Code  
Carmel IN 46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251503

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Leonard Lieberman  
Mailing Address 1 Gateway Ctr. Ste. 106

City State Zip Code  
Newark NJ 07102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243419

Amount of Each Receipt this Period

4700.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Donna Lind  
Mailing Address 2342 Nw Hoyt Street Apt. 2

City State Zip Code  
Portland OR 97210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245529

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

5200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 631 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David S Lindau Mailing Address 3202 Kendal Way City Sleepy Hollow State NY Zip Code 10591 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247521</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Lipman Mailing Address 3309 Devon Ct. City Coconut Grove State FL Zip Code 33133 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Social Worker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245368</b> Amount of Each Receipt this Period 5000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Joan N Lipsig Mailing Address 1410 N. State Pkwy. Apt. 18A City Chicago State IL Zip Code 60610 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244214</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

**5750.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 632 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Linda Locke Mailing Address 6925 Cornell City St. Louis State MO Zip Code 63130 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer MasterCard International Occupation Public Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249848</b> Amount of Each Receipt this Period 85.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Tracey A Loeb Mailing Address 13736 Sunset Blvd City Pacific Palisades State CA Zip Code 90272 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2244035</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Judith Loeb Mailing Address 50 East 89th Street #6E City New York City State NY Zip Code 10128 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer EMILY's List Occupation Fundraiser Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244193</b> Amount of Each Receipt this Period 225.00

**SUBTOTAL** of Receipts This Page (optional) .....

810.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 633 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. William Loeb Mailing Address P.O. Box 524 12 Austerlitz Road City State Zip Code West Stockbridge MA 01266 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242362</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Arlene B. Logan Mailing Address 4618 Wakefield Creek Road City State Zip Code Kinsman OH 44428 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2247091</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms Norma Lombardi Mailing Address 1416 T Street NW City State Zip Code Washington DC 20009 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242465</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 634 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Karen Lombardi Mailing Address 1416 T Street NW City Washington State DC Zip Code 20009 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Social & Scientific Systems Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252501</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Raymond Long Mailing Address 292 Ridge Road City Wales State ME Zip Code 04280 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250880</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ali Long Mailing Address 340 Montford Ave. City Mill Valley State CA Zip Code 94941 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Springcreek Foundation Occupation Family Foundation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2242816</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 635 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Melanie W.S. Loo Mailing Address 1395 56th Street City State Zip Code Sacramento CA 95819 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation CSU Sacramento Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">300.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241238</b> Amount of Each Receipt this Period <div style="text-align: right;">100.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Melanie W.S. Loo Mailing Address 1395 56th Street City State Zip Code Sacramento CA 95819 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation CSU Sacramento Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">300.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245895</b> Amount of Each Receipt this Period <div style="text-align: right;">100.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Mary S. Loud Mailing Address 1235 Yale Place #504 City State Zip Code Minneapolis MN 55403 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">250.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247474</b> Amount of Each Receipt this Period <div style="text-align: right;">50.00</div>
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<div style="text-align: right;">250.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 636 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Diana C. Lowe

Mailing Address 631 Summerfield Road

City State Zip Code  
 Santa Rosa CA 95405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Palm Drive Hospital

Occupation  
Executive Ass.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245378

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Mrs. Helen Lowrey

Mailing Address 11 Dudley Sq

City State Zip Code  
 Shreveport LA 71106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edward Jones

Occupation  
Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250950

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Paige S. Lowther

Mailing Address 5275 Morning Mist Lane

City State Zip Code  
 Alexandria VA 22312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Dept. of Veterans

Occupation  
Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245139

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 637 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert Duncan Luce Mailing Address 20 Whitman Court City Irvine State CA Zip Code 92617 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer UC - Irvine Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250767</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Lumia Mailing Address 631B Yale Way City Monroe Twp State NJ Zip Code 08831 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247832</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Frances Lund Mailing Address 89 Dewey Mountain Road City Saranac Lake State NY Zip Code 12983 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Trudeau Institute Occupation Scientist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246315</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 638 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Laurie Lundy-Ekman

Mailing Address 1800 SW High Street

City State Zip Code  
 Portland OR 97201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pacific University

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244281

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Joanne Lyman

Mailing Address 163 East 81st, # 8B

City State Zip Code  
 NYC NY 10028

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Metropolitan Museum of Art

Occupation  
designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248271

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**C.** Mrs. Bente S. Lyons

Mailing Address 13685 Rivioli Drive

City State Zip Code  
 Palm Beach Gardens FL 33410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250657

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

535.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 639 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Margaret H. MacGillivray Mailing Address 16 Soldiers Place City State Zip Code Buffalo NY 14222 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246940</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Barbara A Mackoy Mailing Address 928 Simon Drive City State Zip Code Cedar Hill TX 75104 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251366</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Fidelity Investments VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Leigh Macqueen Mailing Address 1964 Alder Branch City State Zip Code Germantown TN 38139 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246749</b> Amount of Each Receipt this Period 50.00
Name of Employer Occupation 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) .....

1150.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 640 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Leigh Macqueen Mailing Address 1964 Alder Branch City State Zip Code Germantown TN 38139 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251193</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Prof. Thomas A. Madden Mailing Address 9130 Kedvale Avenue City State Zip Code Skokie IL 60076 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2800.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241910</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Alex Madonik Mailing Address 1533 Keoncrest Drive City State Zip Code Berkeley CA 94702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Applera Corp. Scientist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243750</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 641 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Jo Anne Huntley Magee

Mailing Address 75 Cambridge Pkwy # W901

City State Zip Code  
 Cambridge MA 02142

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Health Care Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246274

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Kristina H. Maher

Mailing Address 1845 W. Via del Recodo

City State Zip Code  
 Green Valley AZ 85614

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244291

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Marjorie D. Main

Mailing Address 3440 S Jefferson Street  
 Apt. 725

City State Zip Code  
 Falls Church VA 22041

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Unemployed

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243600

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

950.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 642 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Frances A. Makover Mailing Address 2660 Peachtree Rd NW #6C City Atlanta State GA Zip Code 30305 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251981</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Louise R. Malakoff Mailing Address 142 Yorkshire Drive City Pittsburgh State PA Zip Code 15208 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Graduate Student Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241905</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Barbara H. Malcolm Mailing Address 4775 S Harbor Dr Apt 101 City Vero Beach State FL Zip Code 32967 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2247002</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. June A Malina		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 1413 Belle View Blvd #A2		<b>Transaction ID:</b> 2246457	
City Alexandria	State VA	Zip Code 22307	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Judith C. Malott		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1382 Newtown Langhorne Rd # N101		<b>Transaction ID:</b> 2243650	
City Newtown	State PA	Zip Code 18940	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Anita J. Mancini		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 110 Berlin Road		<b>Transaction ID:</b> 2248049	
City Gibbsboro	State NJ	Zip Code 08026	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Voorhees Twp. Board of Education	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 644 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) C. D. Manwaring Mailing Address 460 N. Franklin Street Apt. 205 City State Zip Code Syracuse NY 13204 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241893</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ellen Louise Marcus Mailing Address 2140 Santa Cruz Avenue Apartment E307 City State Zip Code Menlo Park CA 94025 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251751</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Hon. Gwen Margolis Mailing Address 1005 Kane Concourse Ste. 205 City State Zip Code Bay Harbor Island FL 33154 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245366</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Metro Dade County Dade Co. Commissioner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 645 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth C Mark Mailing Address 7307 Stafford Road City Alexandria State VA Zip Code 22307 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 428.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246441</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Kathleen Markey Mailing Address PO Box 367 City Cheyenne State WY Zip Code 82003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243749</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Emerson Markham Mailing Address 3158 Gracefield Road Apt. 209 City Silver Spring State MD Zip Code 20904 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252252</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Diane Markman Mailing Address 2216 Ken Oak Rd. City State Zip Code Baltimore MD 21209 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2248289</b> Amount of Each Receipt this Period 42.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Linda Marks Mailing Address 2630 Colston Drive City State Zip Code Bethesda MD 20815 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation US Dept. of Justice Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt MM / DD / YYYY 05 / 01 / 2007 <b>Transaction ID: 2241205</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Dortha E. Marquis Mailing Address 124 Marshall Corner Woodville City State Zip Code Hopewell NJ 08525 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt MM / DD / YYYY 05 / 02 / 2007 <b>Transaction ID: 2241758</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1292.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 647 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David B. Martens			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address PO Box 1810			<b>Transaction ID:</b> 2248907	
City State Zip Code Anacortes WA 98221			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Buckner News Alliance		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Jill E. Martin			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 3984 Blackstone Street			<b>Transaction ID:</b> 2247468	
City State Zip Code Gurnee IL 60031			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Nancy R. Martines			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7	
Mailing Address 2000 Garland Lane Unit # 2319			<b>Transaction ID:</b> 2242097	
City State Zip Code Barrington IL 60010			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Rhoda B Martyn Mailing Address 620 Sand Hill Road # 404G City Palo Alto State CA Zip Code 94304 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2050.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243287</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Odette Maskell Mailing Address 41W581 Old Stage Road City Hampshire State IL Zip Code 60140 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244261</b> Amount of Each Receipt this Period 200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Leslie Faye Mason Mailing Address 1158 Old Gate Court City McLean State VA Zip Code 22102 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Lincoln Investments Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7 <b>Transaction ID: 2243512</b> Amount of Each Receipt this Period 250.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 649 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Karen Jones Mason Mailing Address 2304 Vallejo Street City San Francisco State CA Zip Code 94123 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Legal Svcs for Children Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244204</b> Amount of Each Receipt this Period 2000.00
<b>B.</b> Full Name (Last, First, Middle Initial) S. Dale Mason, Ph.D. Mailing Address 2373 N. Hobart Boulevard City Los Angeles State CA Zip Code 90027 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Marketing Research Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246207</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Kate Massengale Mailing Address 44 Tango Road City Santa Fe State NM Zip Code 87506 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer University of New Mexico Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248860</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

3100.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 650 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David Massey Mailing Address 39 Summerhill Ave. City State Zip Code Jackson NJ 08542 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation IBM Global Services Computer Programmer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247359</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Terry M. Masters Mailing Address 855 Wilcoxson Avenue City State Zip Code Stratford CT 06614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Misys Healthcare Systems sales Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249941</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Kathleen J. Matheson Mailing Address 5966 Omega Street City State Zip Code Riverside CA 92506 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Riverside County Network Mgr Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 245.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250364</b> Amount of Each Receipt this Period 65.00

**SUBTOTAL** of Receipts This Page (optional) .....

365.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 651 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Linda H. Matthews  
Mailing Address 1420 Davis Street

City State Zip Code  
Evanston IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chicago Review Press Inc

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242668

Amount of Each Receipt this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Polly Matzinger  
Mailing Address 8906 Old Georgetown Rd

City State Zip Code  
Bethesda MD 20814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NIH

Occupation  
research scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245118

Amount of Each Receipt this Period

150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marian S. Maxwell  
Mailing Address 6141 N. West Avenue Unit 125

City State Zip Code  
Fresno CA 93711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243273

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

2400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 652 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Hillary A. Mayers Mailing Address 425 Riverside Drive City New York State NY Zip Code 10025 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Social Worker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242391</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Barbara W Mayers Mailing Address 5300 South Shore Drive #107 City Chicago State IL Zip Code 60615 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244208</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Judith A. Maynes Mailing Address 13621 Dearing Bay Drive #1001 City Carol Gables State FL Zip Code 33158 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243120</b> Amount of Each Receipt this Period 250.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 653 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary M. McCabe			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 228 North Newstead Avenue			<b>Transaction ID:</b> 2247466	
City State Zip Code St. Louis MO 63108			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jim McCabe			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 9930 Ferson Rd			<b>Transaction ID:</b> 2251114	
City State Zip Code Durham CA 95938			Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Wm. M. Mercue		Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Susan W. McCalmont			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 45 Bluff Road			<b>Transaction ID:</b> 2251837	
City State Zip Code Barrington RI 02806			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 654 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Anne W McCammon Mailing Address 8750 Glenwick Lane City State Zip Code La Jolla CA 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244086</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Peggy McCan Mailing Address 513 W Broad Street # 517 City State Zip Code Falls Church VA 22046 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Long & Foster Realtor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246272</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Elisa McCarthy Mailing Address 218 Auburn Road City State Zip Code W. Hartford CT 06119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248286</b> Amount of Each Receipt this Period 85.00

**SUBTOTAL** of Receipts This Page (optional) .....

**2085.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 655 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Mary A. McCarthy

Mailing Address 2622 Laurel Avenue

City State Zip Code  
 Manhattan Beach CA 90266

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241669

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Margaret McCarthy

Mailing Address 3326 Alpine Drive

City State Zip Code  
 Ann Arbor MI 48108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248340

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Charlotte McCarthy

Mailing Address P.O. Box 3125

City State Zip Code  
 Las Cruces NM 88003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246805

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

525.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 656 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sally P. McCash Mailing Address 28468 Clubhouse Drive City State Zip Code Easton MD 21601 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245890</b> Amount of Each Receipt this Period 250.00
Name of Employer O'Malley, Miles & Gilmore Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Cynthia P. McCaughan Mailing Address 3050 Military Road NW Apt. 402 City State Zip Code Washington DC 20015 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242703</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Margaret L. McClure Mailing Address 129 Columbia Heights #53 City State Zip Code Brooklyn NY 11201 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247499</b> Amount of Each Receipt this Period 100.00
Name of Employer Self Occupation RN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		450.00
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 657 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jean McCoy Mailing Address 4100 Well Spring Drive Apt. 2306 City Greensboro State NC Zip Code 27410 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245948</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Nancy W McCracken Mailing Address 900 N Taylor Street Apt. 1631 City Arlington State VA Zip Code 22203 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251084</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Melinda McCune Mailing Address 1315 N Spaulding Ave City Los Angeles State CA Zip Code 90046 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Property Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248346</b> Amount of Each Receipt this Period 85.00

**SUBTOTAL** of Receipts This Page (optional) .....

435.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 658 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Janice H. McElroy Mailing Address PO Box 325 City Henniker State NH Zip Code 03242 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer PA Comm for Women - Cmmwl-th PA Occupation Admin. - Exe. Dir. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252359</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. D. E. McGill Mailing Address POB 619 Lake Vallecito City Bayfield State CO Zip Code 81122 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 800.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246626</b> Amount of Each Receipt this Period 200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. D. E. McGill Mailing Address POB 619 Lake Vallecito City Bayfield State CO Zip Code 81122 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 800.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 7 <b>Transaction ID: 2251063</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 659 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Gretchen F McGinley  
Mailing Address 803 Annan Terrace

City State Zip Code  
Los Angeles CA 90042

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
County of Los Angeles

Occupation  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249324

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Terrie McIntosh  
Mailing Address 1476 Michigan Avenue

City State Zip Code  
Salt Lake City UT 84105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Questar Corp

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247478

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Judith G McKelvey  
Mailing Address 61 Elizabeth Circle

City State Zip Code  
Greenbrae CA 94904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TheShawGroup

Occupation  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244646

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 660 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Judith G McKelvey

Mailing Address 61 Elizabeth Circle

City State Zip Code  
 Greenbrae CA 94904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TheShawGroup

Occupation  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245735

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Bozena McLees

Mailing Address 1434 S. Plymouth Court

City State Zip Code  
 Chicago IL 60605

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Loyola University Chicago

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241327

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Martha H. McMahon

Mailing Address PO Box 65304

City State Zip Code  
 Port Ludlow WA 98365

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
IBM

Occupation  
Contact Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250056

Amount of Each Receipt this Period

53.00

**SUBTOTAL** of Receipts This Page (optional) .....

2803.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 661 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Shirley M. McNally

Mailing Address 110 Ames St Unit 5

City State Zip Code  
 Elk Rapids MI 49629

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248541

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Laura R. McNeill

Mailing Address 77 Peachtree Place NE  
 Unit 509 Cotting Court

City State Zip Code  
 Atlanta GA 30309

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242110

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Rachel McPherson

Mailing Address 607 Sixth Street

City State Zip Code  
 Brooklyn NY 11215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 The Good Dog Foundation

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241292

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3025.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 662 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Jettie M. McWilliams

Mailing Address 1013 Morrissey Court

City State Zip Code  
Nashville TN 37221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244269

Amount of Each Receipt this Period

150.00

B. Full Name (Last, First, Middle Initial)

Ms. Joy C. Meason

Mailing Address 1895 Espanola Drive

City State Zip Code  
Miami FL 33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alert Global Media

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242083

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Diane Jones Meier

Mailing Address 307 S. Coulter

City State Zip Code  
Bryan TX 77803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bryant College Hab. for  
Humanity

Occupation

Volunteer Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245859

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) .....

550.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 663 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. Anna E Melby

Mailing Address 119 NW 51st Street

City State Zip Code  
 Seattle WA 98107

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University of Washington

Occupation  
Lecturer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246489

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Dr. Wayne R. Melchior

Mailing Address 28325 Pinehurst

City State Zip Code  
 Roseville MI 48066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CVS

Occupation  
Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248226

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Laura A. Melly

Mailing Address 240 E Evergreen Ave

City State Zip Code  
 Philadelphia PA 19118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Management Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247776

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 664 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Eleanor V. Melville Mailing Address 11112 Kenilworth Avenue Box 56 City State Zip Code Garrett Park MD 20896 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Farm Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 05 / 18 / 2007 <b>Transaction ID: 2245798</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jennifer K. Melville Mailing Address 17 Cove Rd City State Zip Code Freeport ME 04032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Trust for Public Land Occupation Conservation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 31 / 2007 <b>Transaction ID: 2252243</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sarah Menchaca Mailing Address 7 Meadow View Drive City State Zip Code Westport CT 06880 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 17 / 2007 <b>Transaction ID: 2245448</b> Amount of Each Receipt this Period 250.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 665 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Catherine Mendelsohn Mailing Address 6801 N. Dundedin Place City Tucson State AZ Zip Code 85718 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer U of AZ Occupation Career Counselor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245873</b> Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Allen Menkin Mailing Address 15 Saunders Lane City Hackettstown State NJ Zip Code 07840 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer REQUESTED Occupation MD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247493</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Col. Sybil L. Mercer Mailing Address 6235 N. Park Way Apt. A City Tacoma State WA Zip Code 98407 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251839</b> Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 666 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jackie Merrill Mailing Address 278 Oak Ridge Drive City Aspen State CO Zip Code 81611 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Seminar Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt MM / DD / YYYY 05 / 31 / 2007 <b>Transaction ID:</b> 2252053 Amount of Each Receipt this Period 2500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Debra Metcalf Mailing Address 376 Farmhouse Ln City Wind Gap State PA Zip Code 18091 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 02 / 2007 <b>Transaction ID:</b> 2242035 Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Debra Metcalf Mailing Address 376 Farmhouse Ln City Wind Gap State PA Zip Code 18091 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 29 / 2007 <b>Transaction ID:</b> 2251563 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 667 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Betsy Metz Mailing Address 909 Castlehill Lane City Devon State PA Zip Code 19333 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2245750 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	8		2	0	0	7																							
250.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Priscilla Meyer Mailing Address 4424 Athens Avenue City Waco State TX Zip Code 76710 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2241347 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	1		2	0	0	7	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		0	1		2	0	0	7																							
500.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Priscilla Meyer Mailing Address 4424 Athens Avenue City Waco State TX Zip Code 76710 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2241221 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	1		2	0	0	7	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		0	1		2	0	0	7																							
1000.00																																

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 668 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Mary Jane Meyer

Mailing Address 4430 Exeter Drive #306M

City State Zip Code  
 Longboat Key FL 34228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252275

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Miss Loretta Michaelcheck

Mailing Address 65 Central Pk W # 12E

City State Zip Code  
 New York NY 10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

feng shui consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248658

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Reseda Mickey

Mailing Address 1356 Douglas Street # 18

City State Zip Code  
 Los Angeles CA 90026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Disney Channel

Occupation

Broadcasting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245257

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

565.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 669 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Margaret A. Miller Mailing Address 1001 Locust Ave City State Zip Code Charlottesville VA 22901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation University of Virginia Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">300.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245360</b> Amount of Each Receipt this Period <div style="text-align: right;">300.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Anne Miller Mailing Address 108 Gilbert Rd City State Zip Code Dillsburg PA 17019 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">300.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246363</b> Amount of Each Receipt this Period <div style="text-align: right;">100.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Luana S. Miller Mailing Address 142 Maywood Way City State Zip Code San Rafael CA 94901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">500.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2242836</b> Amount of Each Receipt this Period <div style="text-align: right;">250.00</div>

**SUBTOTAL** of Receipts This Page (optional) .....**650.00****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 670 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Emily Miller  
Mailing Address 5750 E Lucia Walk

City State Zip Code  
Long Beach CA 90803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cal.State.Univ.

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249781

Amount of Each Receipt this Period

65.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Emily Miller  
Mailing Address 5750 E Lucia Walk

City State Zip Code  
Long Beach CA 90803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cal.State.Univ.

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249782

Amount of Each Receipt this Period

65.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Ellen W. Miller  
Mailing Address 752 County Highway 7

City State Zip Code  
Otego NY 13825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State University of NY

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245375

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 671 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jess Millikan Mailing Address 812 Laurelwood Drive City San Mateo State CA Zip Code 94403 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Bullivant, Houser, Bailey Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244587</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Jamie R Mills Mailing Address 31 Campau Circle NW City Grand Rapids State MI Zip Code 49503 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Mills & Motley LLC Occupation Partner Employee Benefits Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242080</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Joyanne B. Mills Mailing Address 40W665 Grand Monde Drive City Elburn State IL Zip Code 60119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3200.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245097</b> Amount of Each Receipt this Period 700.00

**SUBTOTAL** of Receipts This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 672 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Rachel Minkoff Mailing Address 3060 Independence Avenue City State Zip Code Bronx NY 10463 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Ziff Davis Pub. Co. Occupation Publishing Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248492</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sylvia C. Mitchell Mailing Address 1111 Wilder Avenue Apt. 16A City State Zip Code Honolulu HI 96822 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State of HI Occupation Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 236.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2248057</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Sally H. Mitchell Mailing Address 1400 Newcastle St City State Zip Code Beaufort SC 29902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243375</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Phyllis Mizel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 5423 Hobart Street		<b>Transaction ID:</b> 2244021
City Pittsburgh	State PA	Zip Code 15217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer U of PGH	Occupation Instructor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Phyllis Mizel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 5423 Hobart Street		<b>Transaction ID:</b> 2245044
City Pittsburgh	State PA	Zip Code 15217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer U of PGH	Occupation Instructor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Phyllis Mizel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7
Mailing Address 5423 Hobart Street		<b>Transaction ID:</b> 2251873
City Pittsburgh	State PA	Zip Code 15217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer U of PGH	Occupation Instructor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 674 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sharon K. Mohler Mailing Address 1050 Carolan Avenue, Apt. 110 City State Zip Code Burlingame CA 94010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241695</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Miss Helen Moksnes Mailing Address 1835 Corporal Kennedy Street #1 City State Zip Code Bayside NY 11360 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Help Clearview Senior Center Volunteer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241659</b> Amount of Each Receipt this Period -250.00 NSF
<b>C.</b> Full Name (Last, First, Middle Initial) Miss Helen Moksnes Mailing Address 1835 Corporal Kennedy Street #1 City State Zip Code Bayside NY 11360 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Help Clearview Senior Center Volunteer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252374</b> Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 675 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Angela Mongillo  
Mailing Address 13610 Roble Alto Court

City State Zip Code  
Los Altos Hills CA 94022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252414

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Virginia G. Monroe  
Mailing Address 143 Pheasant Hollow Drive

City State Zip Code  
Burr Ridge IL 60537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2251006

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Susan Montee  
Mailing Address PO Box 127

City State Zip Code  
Saint Joseph MO 64502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Missouri

Occupation  
State Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245996

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sandy Montgomery Mailing Address 4162 Sunridge Rd City State Zip Code Pebble Beach CA 93953 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker/Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246687</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Patricia H.F. Moore Mailing Address 1045 Tocobaga Lane City State Zip Code Sarasota FL 34236 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243231</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Jeanne Moore Mailing Address 12 Somer Drive City State Zip Code Somerville NJ 08876 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Borough of Somerville, NJ Borough Councilwoman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 301.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242460</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 677 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Starr Moore Mailing Address 3290 Northside Pkwy # 375 City Atlanta State GA Zip Code 30327 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Starr Moore & Associates, - Inc Occupation Designer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID:</b> 2243418 Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Karen J Moore Mailing Address 601 Eagles Wing Ct. City Linthicum Heights State MD Zip Code 21090 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Sinai Hospital Occupation Certified Coding Spec. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 745.00		Date of Receipt MM / DD / YYYY 05 / 30 / 2007 <b>Transaction ID:</b> 2251325 Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Elinor M. Moore Mailing Address 6209 Mineral Point Rd Apt 103 City Madison State WI Zip Code 53705 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 22 / 2007 <b>Transaction ID:</b> 2246865 Amount of Each Receipt this Period 100.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		5200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 678 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Peggy B. Moore

Mailing Address 9121 Bithlo Ln

City State Zip Code  
Tallahassee FL 32312

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245276

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Linda J. Moore

Mailing Address W4504 Mary Hill Park Drive

City State Zip Code  
Fond Du Lac WI 54935

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247043

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)

Mrs. Margaret D. Moose

Mailing Address 317 So. St. Asaph Street

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250957

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 679 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Diana L Morabito			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 1976 Abinante Lane			<b>Transaction ID:</b> 2248465	
City State Zip Code San Jose CA 95124			Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Siemens		Occupation Software Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ann K Morales			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 5622 Massachusetts Ave.			<b>Transaction ID:</b> 2244838	
City State Zip Code Bethesda MD 20816			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Int. Am. Devel. Bank		Occupation Economist/Mgt Anal.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Hannah Morehouse			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 41 Crescent St			<b>Transaction ID:</b> 2249855	
City State Zip Code Northampton MA 01060			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1080.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 680 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Martha Morgan			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 14 Pond Place Lane			<b>Transaction ID:</b> 2242047	
City State Zip Code Concord NH 03301			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Dartmouth Hitchcock Clinic		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Noreen Morgan			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 21 Alida Place			<b>Transaction ID:</b> 2250860	
City State Zip Code Ramsey NJ 07446			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer The Shubert Organization		Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Muffie Moroney			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 4010 Whitman Street			<b>Transaction ID:</b> 2241226	
City State Zip Code Houston TX 77027			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 681 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Dr. Cynthia Morris  
Mailing Address 182 Yulupa Circle

City State Zip Code  
Santa Rosa CA 95405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246735

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Eleanor E. Morton  
Mailing Address 11151 Black Oak Road

City State Zip Code  
Moreno Valley CA 92555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246963

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Patricia Morton  
Mailing Address 266 Willowbrook Drive

City State Zip Code  
North Brunswick NJ 08902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consultant

Occupation  
Strategic Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244225

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 682 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Barbara Moses

Mailing Address 333 Central Park W Apt 71

City State Zip Code  
 New York NY 10025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Orrick, Herrington

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245664

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Dania L. Moss

Mailing Address 4600 N Rodeo Gulch

City State Zip Code  
 Soquel CA 95073

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Naturalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246184

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Marian M. Moss

Mailing Address 5328 Siesta Court

City State Zip Code  
 Sarasota FL 34242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
C.O.M. of Sarasota, Inc.

Occupation  
Property Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244201

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 683 / 963

(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)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Barbara W. Moxon

Mailing Address 31 Joseph Walker Drive

City	State	Zip Code
West Columbia	SC	29169

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	7

Transaction ID: 2242456

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Richard Moyer

Mailing Address 14 Manchester Court

City	State	Zip Code
Berwyn	PA	19312

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	7

Transaction ID: 2247172

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Margot Mudd

Mailing Address 15 S. 6th Street

City	State	Zip Code
Bowling Green	MO	63334

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	7

Transaction ID: 2251872

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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 684 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Jenny Bateman Mudge

Mailing Address 2614 Ellentown Road

City State Zip Code  
 La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247526

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Virginia S. Mueller

Mailing Address 106 L Street Old Sacramento

City State Zip Code  
 Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247533

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Jeanne Mulcahy

Mailing Address 2572 E. Pittsford Road

City State Zip Code  
 Rutland VT 05701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246945

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

6100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 685 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Myra M. Munson			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 7	
Mailing Address 142 Gastineau Avenue			<b>Transaction ID:</b> 2245995	
City State Zip Code Juneau AK 99801			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Sonosky, Chambers Law Firm LLP		Occupation lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Patrick A. Murphy			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 57 Blenheim Farm Ln			<b>Transaction ID:</b> 2245706	
City State Zip Code Phoenix MD 21131			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer REQUESTED		Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Terri L. Murtland			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 7250 Park Lake Dr..			<b>Transaction ID:</b> 2248657	
City State Zip Code Dexter MI 48130			Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C				
Name of Employer University of Michigan		Occupation Nurse-Midwife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1335.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Harold R Musiker Mailing Address 17 Robbins Road City State Zip Code Arlington MA 02476 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244082</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Shunji Muso Mailing Address 18320 Sheffiled Lane City State Zip Code Northridge CA 91326 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Open Axis Inc. Management Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241875</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Gillian Ann Myers Mailing Address 1657 Eton Way City State Zip Code Crofton MD 21114 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243160</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gloria Myers Mailing Address 1733 Harrison Avenue City State Zip Code Salt Lake City UT 84108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251507</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Linda R. Myers Mailing Address 2295 Knotwood Drive City State Zip Code Holt MI 48842 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Michigan Education Association Education Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245111</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn M Myers Mailing Address 412 Crestwood Court City State Zip Code Endwell NY 13760 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245068</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 688 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Holly E. Myers Mailing Address 555 Portola Rd City Portola Vally State CA Zip Code 94028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245958</b> Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sharon J. Myler Mailing Address 5 Mentone Road City Carmel State CA Zip Code 93923 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7 <b>Transaction ID: 2243542</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Estella K. Mysels Mailing Address 621 S. Barrington Avenue # 310 City Los Angeles State CA Zip Code 90049 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2247174</b> Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) .....

5600.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 689 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Linda A. Nadell

Mailing Address 75 E Calle Resplendor

City State Zip Code  
Tucson AZ 85716

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251116

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Jonathan R. Nahon

Mailing Address 2886 Haynie Rd

City State Zip Code  
Custer WA 98240

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Real Estate Develop

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250986

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. JoAnn Nassutti

Mailing Address 2235 Sheraton Place

City State Zip Code  
San Mateo CA 94402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hars, Levy, & Weiland, LLC

Occupation

CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251841

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 690 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Nancy Neal

Mailing Address PO Box 1737

City State Zip Code  
 Aptos CA 95001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251977

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Joy P Nelson

Mailing Address 1200 Lakeshore Ave

City State Zip Code  
 Oakland CA 94606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251535

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Judith Nelson

Mailing Address 15201 Encanto Drive

City State Zip Code  
 Sherman Oaks CA 91403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241211

Amount of Each Receipt this Period

250.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 691 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marie Nelson Mailing Address 156 Hurricane Ridge Drive City Sequim State WA Zip Code 98382 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2247019</b> Amount of Each Receipt this Period 5000.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Shifrah Nenner Mailing Address 1310 Fountain City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241208</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Horiba Inst., Inc. Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Cheryl Nesler Mailing Address 78-6835 Keaupuni St City Kailua Kona State HI Zip Code 96740 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250565</b> Amount of Each Receipt this Period 65.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00		

SUBTOTAL of Receipts This Page (optional) .....

6065.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Cheryl Nesler  
Mailing Address 78-6835 Keapuni St

City State Zip Code  
Kailua Kona HI 96740

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248128

Amount of Each Receipt this Period

65.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Irene Nevil  
Mailing Address 12062 Rose Marie Lane

City State Zip Code  
Los Angeles CA 90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246216

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Margaret H. Newell  
Mailing Address 1717 Jewel Box Drive

City State Zip Code  
Sanibel FL 33957

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
freelance

Occupation  
editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251312

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1565.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 693 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Newman Mailing Address 20 Quickstep Lane Apt. 1 City San Francisco State CA Zip Code 94115 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246652</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Donald R. Newmark Mailing Address 25848 Hatton Road City Carmel State CA Zip Code 93923 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250644</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Linda Laureen Nicholes Mailing Address 6261 East Fox Glen Drive 4070 City Anaheim State CA Zip Code 92807 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Environmental Activist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248638</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 694 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Jan J. Nickey

Mailing Address 5725 Oak Cliff Dr

City State Zip Code  
 El Paso TX 79912

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2242155

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B.** Dr. Pamela Nickless

Mailing Address 1 Red Oak Road

City State Zip Code  
 Asheville NC 28804

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251761

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Sharon Y. Nickols

Mailing Address 104 Telfair Place

City State Zip Code  
 Athens GA 30606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University of Georgia

Occupation  
Dean/Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241864

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 695 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Keith E. Nighthenheler

Mailing Address 4235 West 300 South

City State Zip Code  
 Greencastle IN 46135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DePauw University

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249351

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Judith Nordberg

Mailing Address 3963 Mt Albertine Avenue

City State Zip Code  
 San Diego CA 92111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
V.A. Medical Center

Occupation  
Medical Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241263

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Mary Beth B. Norton

Mailing Address 159 Remington Road

City State Zip Code  
 Ithaca NY 14850

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cornell University

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246422

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

585.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 696 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Christine L. Nottingham

Mailing Address 1707 Woodview Lane

City State Zip Code  
Anderson IN 46011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Allman & Company

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248188

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Gloria W. Nusbacher

Mailing Address 694 Knollwood Drive

City State Zip Code  
West Hempstead NY 11552

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hughes Hubbard & Reed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244915

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Stephanie M. Oana

Mailing Address 6257 Acacia Ave.

City State Zip Code  
Oakland CA 94618

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247228

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 697 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Susanne J. Obaid Mailing Address PO Box 2018 City State Zip Code Crested Butte CO 81224 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251097</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Nancy Oberman Mailing Address 10968 E. Crestridge Circle City State Zip Code Englewood CO 80111 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 236.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2248071</b> Amount of Each Receipt this Period 36.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary B. O'Brien Mailing Address PO Box 688 City State Zip Code Stinson Beach CA 94970 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Artist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252422</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

636.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 698 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Barbara Oceanlight  
Mailing Address 3373 St. Michael Drive

City State Zip Code  
Palo Alto CA 94306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Family & Children Services

Occupation  
Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249849

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Martha Q. Odell  
Mailing Address 616 Admiral Dr Apt 353

City State Zip Code  
Annapolis MD 21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250928

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Leslie Oelsner  
Mailing Address 1451 N. Canterbury Road

City State Zip Code  
Fayetteville AR 72701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Social Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249097

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 699 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Nancy G. Oertel Mailing Address 6018 SW Cupola Drive City State Zip Code Newport OR 97366 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246934</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Annette Oestreicher-Grollman Mailing Address 14 Childs Lane City State Zip Code Setauket NY 11733 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241421</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation Oestreicher Medical Commu- nications Medical editor/writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Shirley G. Olde Mailing Address 9028 Carrington Ridge Drive City State Zip Code Raleigh NC 27615 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2248222</b> Amount of Each Receipt this Period 125.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) .....

325.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 700 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. Gretchen E. Oley, M.D.

Mailing Address 105 Timberlake Drive

City State Zip Code  
Huntington WV 25705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University of Physicians  
and Surgeon

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248171

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Randall Oliver

Mailing Address 922 N. Battin Street

City State Zip Code  
Wichita KS 67208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241362

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Sylvia B Olivetti

Mailing Address 1917 Locust Grove Road

City State Zip Code  
Silver Spring MD 20910

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Arent Fox

Occupation  
Legal Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248264

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 701 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Margaret E. Olsen-Kohner Mailing Address 1527 Tigertail Road City State Zip Code Los Angeles CA 90049 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2242045</b> Amount of Each Receipt this Period 250.00
Name of Employer Self Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Katherine F. Olson Mailing Address 100 1st Avenue S. Apt. 14 City State Zip Code Seattle WA 98104 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247456</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Carin Olson Mailing Address 5213 NE 180 Street City State Zip Code Seattle WA 98155 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251465</b> Amount of Each Receipt this Period 750.00
Name of Employer U. of Washington Occupation physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		

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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 702 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Barbara O'Neal Mailing Address 818 Liberty Street City State Zip Code Dallas TX 75204 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Benefit Partners Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247512</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Abby McCormick O'Neil Mailing Address 1340 N. State Parkway City State Zip Code Chicago IL 60610 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Community Volunteer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247428</b> Amount of Each Receipt this Period 5000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn S. O'Neil Mailing Address 7225 Creekside Drive City State Zip Code Lansing MI 48917 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251908</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

**5750.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 703 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Eunice B. Ordman Mailing Address 4045 Graham Oaks Court City Memphis State TN Zip Code 38122 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242090</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn J. O'Shea Mailing Address 17 Rotary Drive City Summit State NJ Zip Code 07901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246824</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Lynda T O'Sullivan Mailing Address 8212 Coach Street City Potomac State MD Zip Code 20854 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation US Air Force lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245106</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 704 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Ernesto R. Otero

Mailing Address 3839 Sebren Avenue

City State Zip Code  
 Long Beach CA 90808

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244942

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Yael Ouzillou

Mailing Address 3503 Winfield Drive

City State Zip Code  
 Austin TX 78704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Jean Carnahan for Missouri

Occupation

Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244227

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Carla L. Overberger

Mailing Address 37 Nokomis Avenue

City State Zip Code  
 San Anselmo CA 94960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 ACME Business Corp

Occupation

Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249363

Amount of Each Receipt this Period

85.00

**SUBTOTAL** of Receipts This Page (optional) .....

585.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 705 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Joanne E. Overleese Mailing Address 849 Coast Boulevard # CN213 City State Zip Code La Jolla CA 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247497</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. H. Martyn Owen Mailing Address 80 Matthew Drive City State Zip Code Brunswick ME 04011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2248054</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Jeanna L. Owens Mailing Address 1545 Arboretum Drive #311 City State Zip Code Oshkosh WI 54901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Fond Du Lac Regional Clinic Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244572</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1600.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 706 / 963

(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)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Debby Manion Oxley

Mailing Address 5539 Midway Road

City State Zip Code  
Midway KY 40347

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	7

Transaction ID: 2244810

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Ann M. Packard

Mailing Address 532 East 87th Street

City State Zip Code  
New York NY 10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NY HospitalOccupation  
Pediatric Resident

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	0	7

Transaction ID: 2248267

Amount of Each Receipt this Period

85.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ann L. Paes

Mailing Address 4160 SW 83rd Ave.

City State Zip Code  
Portland OR 97225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	7

Transaction ID: 2247179

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

435.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 707 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Edward H. Page

Mailing Address 1299 N. Tamiami Trail # 421

City State Zip Code  
Sarasota FL 34226

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242111

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Lisa B. Palley

Mailing Address 16 Island Ave Apt 4E

City State Zip Code  
Miami Beach FL 33139

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Alper Jewish Com Ctr

Occupation

PR Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241244

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Mrs. Esther H. Palmer

Mailing Address Pennwood Vlg. # K205  
 1382 Newtown Langhorne Rd

City State Zip Code  
Newtown PA 18940

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246337

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 708 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elaine Parks Mailing Address 703 Manor Lane City Cheyenne State WY Zip Code 82009 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Laramie Co. Comm Coll Occupation Instructor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244893</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Lisa M Parral Mailing Address 111 Harkins Rd. City Woodside State CA Zip Code 94062 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246473</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Parson Mailing Address 2256 N. Lincoln Park W. City Chicago State IL Zip Code 60614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251518</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 709 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Nancy G Pastroff  
Mailing Address 6420 SW 50 Street

City State Zip Code  
Miami FL 33155

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pastroff, Barja, Kelly &  
Co.

Occupation  
Certified Public Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242718

Amount of Each Receipt this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Carrin M. Patman  
Mailing Address 2702 Moonlight Bend

City State Zip Code  
Austin TX 78703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241225

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Phyllis S. Patterson  
Mailing Address 3887 S. Cook Valley Drive SE

City State Zip Code  
Grand Rapids MI 49546

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251104

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 710 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Angela Paulos Mailing Address 27 Robledo Drive City Dallas State TX Zip Code 75230 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 02 / 2007 <b>Transaction ID: 2240848</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lisa Payne-Miller Mailing Address 21 Potomac City Irvine State CA Zip Code 92620 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Academic Counselor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 22 / 2007 <b>Transaction ID: 2246966</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Laura B. Peck Mailing Address 4545 Grand Avenue City Ojai State CA Zip Code 93023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Community Action Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2248675</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 711 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marsha Pedersen Mailing Address 5250 W. Avenue L6 City Quartz Hill State CA Zip Code 93536 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 05 / 23 / 2007 <b>Transaction ID: 2248214</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Donald C Pelz Mailing Address 3470 Carpenter Road, # 211 City Ypsilanti State MI Zip Code 48197 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 470.00		Date of Receipt MM / DD / YYYY 05 / 21 / 2007 <b>Transaction ID: 2247834</b> Amount of Each Receipt this Period 85.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Donna Pepos Mailing Address 4206 Forest Beach Drive, NW City Gig Harbor State WA Zip Code 98335 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 05 / 01 / 2007 <b>Transaction ID: 2241290</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

435.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 712 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Theresa Perenich Mailing Address 215 Riverhill Drive City Athens State GA Zip Code 30606 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244293</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marla S Perkel Mailing Address PO Box 755 City Wellfleet State MA Zip Code 02667 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248425</b> Amount of Each Receipt this Period 20.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Marla S Perkel Mailing Address PO Box 755 City Wellfleet State MA Zip Code 02667 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251279</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

220.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 713 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Jacquelin Perry Mailing Address 12319 Brock Avenue City State Zip Code Downey CA 90242 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247318</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Jean S. Perwin Mailing Address 3435 N. Meridian Avenue City State Zip Code Miami Beach FL 33140 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242204</b> Amount of Each Receipt this Period 1500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Beverly Peterkofsky Mailing Address 612 Rollins Avenue City State Zip Code Rockville MD 20852 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242089</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 714 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Alexandra Peters  
Mailing Address 262 Central Park West

City State Zip Code  
New York NY 10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247204

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Elisabeth T Peters  
Mailing Address 425 Liberty Street

City State Zip Code  
San Francisco CA 94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montgomery Gallery

Occupation  
Art Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2244020

Amount of Each Receipt this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Anne C Petersen  
Mailing Address 3715 Blackberry Lane

City State Zip Code  
Kalamazoo MI 49008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Global Philanthropy Alliance

Occupation  
executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242467

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 715 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Linda S. Peterson Mailing Address 306 S. Westgate Avenue City Los Angeles State CA Zip Code 90049 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occidental Petroleum Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242713</b> Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. E. Blake Peterson Mailing Address 4195 Bayberry Drive City Santa Rosa State CA Zip Code 95404 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7 <b>Transaction ID: 2243399</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. E. Blake Peterson Mailing Address 4195 Bayberry Drive City Santa Rosa State CA Zip Code 95404 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251305</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

5150.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 716 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Gary M Peterson Mailing Address 810 Massachusetts Ave., N.E. City Washington State DC Zip Code 20002 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247819</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Christina F. Petra Mailing Address 370 Arroyo Ter Uppr City Pasadena State CA Zip Code 91103 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245099</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Catherine H. Petros Mailing Address 25119 US Hwy 40 City Golden State CO Zip Code 80401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Carlsen Resources, Inc. Occupation Executive Search Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242700</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 717 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mrs. Sheila Pfafflin

Mailing Address 173 Gates Avenue

City State Zip Code  
 Gillette NJ 07933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242324

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

Ms. Nancy Phaneuf

Mailing Address 238 East Davis Blvd  
 Suite 207

City State Zip Code  
 Tampa FL 33606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242190

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Ms. Nancy Pitt

Mailing Address 10 East Calle De Amistad

City State Zip Code  
 Tucson AZ 85716

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Self

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245098

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 718 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Genevieve Plamondon Mailing Address PO Box 3634 234 North Willow City Telluride State CO Zip Code 81435 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Koenig & Strey GMAC Occupation Real Estate Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2247689</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Pauline R. Plesset Mailing Address 713 San Mario Drive City Solona Beach State CA Zip Code 92075 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251753</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Teresa A. Poirier Mailing Address 1709 Silverwood Drive City Martinez State CA Zip Code 94553 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer John Muir Medical Center Occupation RN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249292</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 719 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David B Poor Mailing Address 25 West 94th Street City New York State NY Zip Code 10025 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2247629</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Patricia Pope Mailing Address 2 Tamalpais Road City Berkeley State CA Zip Code 94708 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246234</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sharon L. Pope Mailing Address 4307 Firestone Drive City Houston State TX Zip Code 77035 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Spring Branch ISD Occupation Curriculum Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250475</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 720 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sara S. Portnoy		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 785 Park Avenue		<b>Transaction ID:</b> 2244377	
City New York	State NY	Zip Code 10021	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Diane Post		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 35 Corte Alegre		<b>Transaction ID:</b> 2252513	
City Greenbrae	State CA	Zip Code 94904	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Beverly Postl		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 5338 Doliver Drive		<b>Transaction ID:</b> 2244216	
City Houston	State TX	Zip Code 77056	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) .....

5335.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 721 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Agnes Potter			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 49 Edgewater Drive			<b>Transaction ID:</b> 2246238	
City State Zip Code Old Greenwich CT 06870			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer 		Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Diane McMahon Pratt			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 16 Brooks Lane			<b>Transaction ID:</b> 2243306	
City State Zip Code Portland CT 06480			Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Yale Univ.		Occupation Biologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Susan H Press			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 3604 Shepherd Street			<b>Transaction ID:</b> 2249078	
City State Zip Code Chevy Chase MD 20815			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer 		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 722 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary N. Preyer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1010 Waltham Street F 22 Brookhaven		<b>Transaction ID:</b> 2247693	
City Lexington	State MA	Zip Code 02421	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Ann S Price		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 64 Quarry Lane		<b>Transaction ID:</b> 2244115	
City Bedford	State NY	Zip Code 10506	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Tina A. Proffitt		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 33 Kirkland Drive		<b>Transaction ID:</b> 2245637	
City Stow	State MA	Zip Code 01775	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 723 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. William M Protheroe Mailing Address 8356 Burwell Circle City Port Charlotte State FL Zip Code 33981 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242184</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. William M Protheroe Mailing Address 8356 Burwell Circle City Port Charlotte State FL Zip Code 33981 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 7 <b>Transaction ID: 2242216</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. William M Protheroe Mailing Address 8356 Burwell Circle City Port Charlotte State FL Zip Code 33981 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246462</b> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 724 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. David A Pyne Mailing Address 7248 Eaton Court City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244554</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Richard E Quandt Mailing Address 162 Springdale Road City Princeton State NJ Zip Code 08540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251317</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Terry Quinn Mailing Address 215 Zells Mill Road City Newport State VA Zip Code 24128 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244910</b> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 725 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Evelyn M Radford Mailing Address 810 El Quanito Drive City State Zip Code Danville CA 94526 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251335</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Susan M. Ragon Mailing Address PO Box 380281 City State Zip Code Cambridge MA 02238 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243102</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Susan S. Rai Mailing Address 20 Cow Lane City State Zip Code Great Neck NY 11024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Vera Inst. of Justice Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245467</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 726 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Dr. Sheila N. Rajaratnam  
Mailing Address 6591 Swissway Drive

City State Zip Code  
Dayton OH 45459

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mont-Greene Anes, Inc.

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250798

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Virginia M. Ralston  
Mailing Address 8348 Colton Cove

City State Zip Code  
Germantown TN 38139

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2244018

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Anne B Ramsay  
Mailing Address 20 South 19th St

City State Zip Code  
Fernandina Beach FL 32034

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245264

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

1285.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 727 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. William C. Rands  
Mailing Address 16845 Kercheval

City State Zip Code  
Grosse Pointe MI 48230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sagres Partners LLP

Occupation  
Partner Limited

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244290

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Ann Raper  
Mailing Address 3 Gwynedd Lane

City State Zip Code  
Summerfield NC 27358

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243667

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Sylvia Raphael  
Mailing Address 508 Hermleigh Road

City State Zip Code  
Silver Spring MD 20902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2242032

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 728 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jane Rasco Mailing Address 39124 Channel Dr City State Zip Code Cathedral City CA 92234 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244567</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jean Rash Mailing Address 8651 Tenth Street North Apt. 130 City State Zip Code St Petersburg FL 33702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250237</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Cynthia Stone Raskin Mailing Address 649 W. Arlington Place City State Zip Code Chicago IL 60614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Public Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241745</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 729 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marilee Rasmussen Mailing Address 2291 Bowdoin Street City Palo Alto State CA Zip Code 94306 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Health Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00		Date of Receipt MM / DD / YYYY 05 / 17 / 2007 <b>Transaction ID: 2245052</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Judith Ratzan Mailing Address 60 Edgewater Drive #9F City Coral Gables State FL Zip Code 33133 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer University of Miami Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1977.80		Date of Receipt MM / DD / YYYY 05 / 07 / 2007 <b>Transaction ID: 2253049</b> Amount of Each Receipt this Period 1727.80  In-Kind
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Josephine Rawlings Mailing Address 2238 2nd Street City Wyandotte State MI Zip Code 48192 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Ford Motor Occupation Registered Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 565.00		Date of Receipt MM / DD / YYYY 05 / 09 / 2007 <b>Transaction ID: 2243490</b> Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional) .....

**2742.80**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 730 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Josephine Rawlings Mailing Address 2238 2nd Street City Wyandotte State MI Zip Code 48192 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Ford Motor Occupation Registered Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 565.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245017</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Helen J. Ray Mailing Address 6044 Dillingham City Shreveport State LA Zip Code 71106 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251819</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Barbara C Rayson Mailing Address 8218 Maidencane Place City Port St. Lucie State FL Zip Code 34952 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243268</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Katherine A Read

Mailing Address 75 Nehoiden Road

City State Zip Code  
 Newton MA 02468

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245404

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Katherine B. Redding

Mailing Address PO Box 220

City State Zip Code  
 Pinehurst NC 28370

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243277

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Micaela B. Reddy

Mailing Address 3145 Loma Verde Drive, # 15

City State Zip Code  
 San Jose CA 95117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Roche Palo Alto

Occupation  
Research Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2244062

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 732 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Micaela B. Reddy			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 3145 Loma Verde Drive, # 15			<b>Transaction ID:</b> 2250532	
City State Zip Code San Jose CA 95117			<b>Amount of Each Receipt this Period</b> 25.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Roche Palo Alto		Occupation Research Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Laurie Reed			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 334 E Winchester Road			<b>Transaction ID:</b> 2242443	
City State Zip Code Libertyville IL 60048			<b>Amount of Each Receipt this Period</b> 250.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Abbott Laboratories		Occupation Research Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Laurie Reed			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 334 E Winchester Road			<b>Transaction ID:</b> 2248194	
City State Zip Code Libertyville IL 60048			<b>Amount of Each Receipt this Period</b> 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Abbott Laboratories		Occupation Research Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1275.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 733 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Amy H. Regan

Mailing Address 189 Woosamonsa Road

City State Zip Code  
 Pennington NJ 08534

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241986

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Dr. David A. Reichert

Mailing Address 5431 S Compass Road

City State Zip Code  
 Tempe AZ 85283

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242373

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Lee Reilly

Mailing Address 2100 W. Giddings Street

City State Zip Code  
 Chicago IL 60625

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251155

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 734 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary K. Reilly  
Mailing Address 4504 Alpine Rose Bnd

City State Zip Code  
Ellicott City MD 21042

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brophy & Reilly

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244846

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Roshan Reporter  
Mailing Address 2510 Kenilworth Avenue

City State Zip Code  
Los Angeles CA 90039

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
County of Los Angeles

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251691

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Eleanor D. Revill  
Mailing Address 460 Old Main Street

City State Zip Code  
Rocky Hill CT 06067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246245

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 735 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Susan F. Rice		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 6 / 2 0 0 7	
Mailing Address 10126 Empyrean Way #103		<b>Transaction ID:</b> 2242210	
City State Zip Code Los Angeles CA 90067		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Management Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ann L. Rice		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 37734 Second Street		<b>Transaction ID:</b> 2246456	
City State Zip Code Fremont CA 94536		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sun Microsystems, Inc. Occupation Technical Writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ann L. Rice		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 37734 Second Street		<b>Transaction ID:</b> 2251140	
City State Zip Code Fremont CA 94536		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sun Microsystems, Inc. Occupation Technical Writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

5250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 736 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Virginia A Rice  
Mailing Address 54 Whiteoaks Circle

City State Zip Code  
Bluffton SC 29910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wayne Windham Architects

Occupation  
Administrative Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250498

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Donna I. Rich  
Mailing Address 6830 S.W. 48th Terrace

City State Zip Code  
Miami FL 33155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rio Palenque Research Corp

Occupation  
Environmental Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242453

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joan L. Rich  
Mailing Address 818 SE 4th St Apt 302

City State Zip Code  
Ft Lauderdale FL 33301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pisces

Occupation  
Retail

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241252

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 737 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joan L. Rich Mailing Address 818 SE 4th St Apt 302 City State Zip Code Ft Lauderdale FL 33301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Pisces Retail Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251851</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Amy L. Richards Mailing Address 1545 North Catalina Avenue City State Zip Code Pasadena CA 91104 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self stage manager Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 7 <b>Transaction ID: 2243791</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jean Richards Mailing Address 29 Merriwold Lane City State Zip Code Deep River CT 06417 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247326</b> Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) .....

550.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 738 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Kit Riggs		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 997 Louise Avenue		<b>Transaction ID:</b> 2249761	
City San Jose	State CA	Zip Code 95125	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Carol Rigmark		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 2043 Walters Avenue		<b>Transaction ID:</b> 2243651	
City Northbrook	State IL	Zip Code 60062	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Carol Rigmark Company	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary M. Ring		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 552 Linden Avenue		<b>Transaction ID:</b> 2252045	
City East Aurora	State NY	Zip Code 14052	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Clinical Social Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 739 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sandra Ripberger  
Mailing Address 7412 Riverview Drive

City State Zip Code  
Bradenton FL 34209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241902

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Alyce R Ritti  
Mailing Address 170 Cherrywood Way

City State Zip Code  
Port Matilda PA 16870

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250988

Amount of Each Receipt this Period

50.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Kimberly K. Ritzheimer  
Mailing Address 20578 East Buchanan Drive

City State Zip Code  
Aurora CO 80011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dept. of Defense

Occupation  
Information Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250233

Amount of Each Receipt this Period

85.00

**SUBTOTAL** of Receipts This Page (optional) .....

385.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 740 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Jeanette M. Roach

Mailing Address 6 Seaview Ave

City State Zip Code  
Piedmont CA 94611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243646

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)

Ms. Judith Roales

Mailing Address 20374 Blue Point Dr

City State Zip Code  
Rehoboth Bch DE 19971

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Petersburg Times

Occupation  
Executive V.P. & Gen. Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248690

Amount of Each Receipt this Period

85.00

C. Full Name (Last, First, Middle Initial)

Ms. Florence D. Roberts

Mailing Address 801 Valley Road

City State Zip Code  
Mason NH 03048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250222

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

2595.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 741 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

A. Dr. Nancy M. Robinson

Mailing Address 5005 NE 45th Street

City State Zip Code  
 Seattle WA 98105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U. Washington

Occupation  
Retired professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2244022

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dr. Nancy M. Robinson

Mailing Address 5005 NE 45th Street

City State Zip Code  
 Seattle WA 98105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U. Washington

Occupation  
Retired professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248348

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Dr. Phyllis Rochelle

Mailing Address 77245 Loma Vista

City State Zip Code  
 La Quinta CA 92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247000

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

225.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 742 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. James S. Rock

Mailing Address 48 Henry Street

City State Zip Code  
Norwich CT 06360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242084

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Patsy Rogers

Mailing Address P.O. Box 616

City State Zip Code  
New Suffolk NY 11956

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

composer, teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241899

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joan Rogin

Mailing Address 5627 Olinda Road

City State Zip Code  
El Sobrante CA 94803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246993

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 743 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Susan D. Romaine  
Mailing Address 7 Conquest Avenue

City State Zip Code  
Sullivans IS SC 29482

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249890

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Gretchen B. Roose

Mailing Address 64 Kendal Drive

City State Zip Code  
Oberlin OH 44074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251524

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Briana Rose

Mailing Address 203 Evergreen Avenue

City State Zip Code  
Mill Valley CA 94941

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241053

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 744 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Barbara A. Rosen Mailing Address 320 Central Park W # 3C City New York State NY Zip Code 10025 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242392</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marci B Rosenberg Mailing Address 4514 Oleander City Bellaire State TX Zip Code 77401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241420</b> Amount of Each Receipt this Period 5000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Paul Rosenblum Mailing Address 2424 Edenbohn Avenue Ste 108 City Metairie State LA Zip Code 70001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation none Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2247732</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 745 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Julie Rosenfeld			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 201 Crandon Blvd. Apt. 437			<b>Transaction ID:</b> 2244926	
City State Zip Code Key Biscayne FL 33149		Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation REQUESTED				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ann Rosewater			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 629 Cresthill Avenue, N.E.			<b>Transaction ID:</b> 2246905	
City State Zip Code Atlanta GA 30306		Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C				
Name of Employer Self Occupation Consultant				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Madelyn C. Ross			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 4721 36th St N			<b>Transaction ID:</b> 2243599	
City State Zip Code Arlington VA 22207		Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C				
Name of Employer Self Occupation Editor/Consultant				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 746 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Janice G. Rosse

Mailing Address 78 Lakeview

City State Zip Code  
 Irvine CA 92604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252474

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Mr. Michael Rotenberg

Mailing Address 17 Chestnut Street

City State Zip Code  
 Boston MA 02108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Terrace Trust

Occupation

Real East Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242420

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Glenda M. Rothberg

Mailing Address 319 Gravilla Street

City State Zip Code  
 La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

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 5 / 1 6 / 2 0 0 7

Transaction ID: 2248377

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 747 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Ann M. Rothschild

Mailing Address 5825 S. Dorchester Avenue

City State Zip Code  
 Chicago IL 60637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Social Work

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247361

Amount of Each Receipt this Period

350.00

B. Full Name (Last, First, Middle Initial)

Ms. Patricia A. Rouse

Mailing Address 44 Encino Loma

City State Zip Code  
 Beeville TX 78102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Greystone Servicing Corp.

Occupation  
Mortgage Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251167

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)

Mrs. Judith S Rowe

Mailing Address 4701 Willard Avenue # 405

City State Zip Code  
 Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248178

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

650.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 748 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. E. Di Rowland

Mailing Address 121 N. Carolina Avenue, SE

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kaiser Family Foundation

Occupation  
Foundation Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251124

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)

Ms. Virginia Royden

Mailing Address 620 Sand Hill Rd.  
Apt. 218D

City State Zip Code  
 Palo Alto CA 94304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245796

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Ms. Rhea Joyce Rubin

Mailing Address 5860 Heron Drive

City State Zip Code  
 Oakland CA 94618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Library Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242102

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 749 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Joan Ruddy  
Mailing Address 1136 Westward Ho Road

City State Zip Code  
Lake Oswego OR 97034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246304

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Linda K. Rude  
Mailing Address 839 Union St.

City State Zip Code  
San Francisco CA 94133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
839 Union St.

Occupation  
Landscape Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245124

Amount of Each Receipt this Period

200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Phyllis Russell  
Mailing Address 11781 Ridge Rim Road

City State Zip Code  
Chico CA 95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244908

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 750 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Judith S Russell

Mailing Address 2426 Westside Drive

City State Zip Code  
 North Chili NY 14514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248268

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)

Ms. Elva Rust

Mailing Address 61 Van Ripper Lane

City State Zip Code  
 Orinda CA 94563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246231

Amount of Each Receipt this Period

75.00

C. Full Name (Last, First, Middle Initial)

Mr. John Rutledge

Mailing Address 56 Monument Street, # 1

City State Zip Code  
 Medford MA 02155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ZixCorp

Occupation  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249875

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

175.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 751 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Patricia J. Ryan

Mailing Address 17 south Ferris Street

City State Zip Code  
 Irvington NY 10533

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Freelance writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249453

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Rebecca Ryan-Starks

Mailing Address 238 Thornwood Road

City State Zip Code  
 Stamford CT 06903

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bel/Kaukauna USA

Occupation  
Director of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244306

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Parisa Sabeti

Mailing Address 416 Commonwealth Avenue  
 # 619

City State Zip Code  
 Boston MA 02215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249845

Amount of Each Receipt this Period

85.00

**SUBTOTAL** of Receipts This Page (optional) .....

420.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 752 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Carol S. Sabochick

Mailing Address 521 Apple Lane

City State Zip Code  
Harleysville PA 19438

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Unisys

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250839

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Katharine B Sacks

Mailing Address 165 Bishop Street

City State Zip Code  
New Haven CT 06511

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self

Occupation  
attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244069

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jean Sampson

Mailing Address 744 Oak St

City State Zip Code  
Winnetka IL 60093

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248053

Amount of Each Receipt this Period

1000.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 753 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mrs. Jo A. Sanders

Mailing Address 354 N. Normal Street

City State Zip Code  
 Macomb IL 61455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251891

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Ms. Lenore Satterfield

Mailing Address 3750 Peachtree Road NE  
 Apt. 922

City State Zip Code  
 Atlanta GA 30319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250962

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

Ms. Cheryl Saunders

Mailing Address 208 Morning Mdw

City State Zip Code  
 Midland MI 48640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251182

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) .....

800.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 754 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Margaret E. Saunders

Mailing Address 6935 Carlisle Ct Ap

City State Zip Code  
 Naples FL 34109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247003

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Cheryl K. Savage

Mailing Address 54 St. Stephens School Rd.

City State Zip Code  
 Austin TX 78746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTED

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241222

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Nathan Savin

Mailing Address 216 Magowan Ave

City State Zip Code  
 Iowa City IA 52246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U IA

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242648

Amount of Each Receipt this Period

250.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 755 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Fannette Sawyer Mailing Address 10 Longwood Drive Apt.463 City State Zip Code Westwood MA 02090 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241853</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Betty Sawyer Mailing Address 27 Bedford Court City State Zip Code Bedford MA 01730 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246823</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sara Saylor Mailing Address 3137 Kaiser Way City State Zip Code Carmichael CA 95608 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245896</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation Care Giver/ Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		2100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 756 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Constance B. Sayre Mailing Address 330 East 63 Street, # 4H City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation Publishing Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 21 / 2007 <b>Transaction ID: 2246217</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Georgann E Scally Mailing Address 502 Sealight Lane City Redwood City State CA Zip Code 94065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 05 / 30 / 2007 <b>Transaction ID: 2251327</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Maryan S. Schall Mailing Address 432 Ennisbrook Dr City Santa Barbara State CA Zip Code 93108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 29 / 2007 <b>Transaction ID: 2251531</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 757 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Enos Edson Schaper Mailing Address 500 Dogwood Lane City State Zip Code Princeton KY 42445 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247394</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lois Scharf Mailing Address 5 Kenwood Court City State Zip Code Cleveland OH 44122 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation CWRU Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247761</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sylvia A. Scharf Mailing Address 625 E. Alvarado Street City State Zip Code Pomona CA 91767 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2240936</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 758 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Jane C. Scharff

Mailing Address 585 S Greer St Apt 402

City State Zip Code  
 Memphis TN 38111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243276

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Ms. Jane C. Scharff

Mailing Address 585 S Greer St Apt 402

City State Zip Code  
 Memphis TN 38111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246894

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Ms. Gloria Scharlin

Mailing Address 10 Edgewater Dr Apt 4A

City State Zip Code  
 Coral Gables FL 33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243681

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

700.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 759 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Janet B. Scher

Mailing Address 1050 W. Cross Street

City State Zip Code  
Lakewood NJ 08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246507

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)

Mr. Brynal Scherr

Mailing Address 9 Totoket Road

City State Zip Code  
Branford CT 06405

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247803

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)

Mr. Brynal Scherr

Mailing Address 9 Totoket Road

City State Zip Code  
Branford CT 06405

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251814

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 760 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Renee Schiffrin

Mailing Address 708 Park View

City State Zip Code  
 Pompton Plains NJ 07444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251849

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Lisa Schiller

Mailing Address 99 Reade Street, Apt. 2F

City State Zip Code  
 New York NY 10013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251949

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)

Mr. Harold Schindele

Mailing Address 8942 Tewsbury Gate

City State Zip Code  
 Maple Grove MN 55311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246246

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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 761 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Boynton M. Schmitt

Mailing Address 225 Dromara Road

City State Zip Code  
 Guilford CT 06437

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249842

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Gloria M. Schneider

Mailing Address 1300 Bower Hill Road  
 Apt. 1424

City State Zip Code  
 Pittsburgh PA 15243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247748

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Sari Rose Schneider

Mailing Address 9802 Mercerwood Drive

City State Zip Code  
 Mercer Island WA 98040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245295

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 762 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Anna Mae Schnucker

Mailing Address 23582 Railroad St

City State Zip Code  
 Parkersburg IA 50665

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248708

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B.** Dr. Katherine Schoenhals

Mailing Address 9397 Midnight Pass Road  
 Apt. 506

City State Zip Code  
 Sarasota FL 34242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243290

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Robert Schor

Mailing Address 5464 Northumberland Street

City State Zip Code  
 Pittsburgh PA 15217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 University of Pittsburgh

Occupation

Faculty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251250

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

95.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 763 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Marilyn D Schorin		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 1400 Willow Avenue 1901		<b>Transaction ID:</b> 2245969	
City State Zip Code Louisville KY 40204		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Schorin Strategies, LLC Principal			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Stanley Schroeder		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 572 Wapiti Loop		<b>Transaction ID:</b> 2249603	
City State Zip Code Hamilton MT 59840		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Faye Schuett		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 23211 Cass		<b>Transaction ID:</b> 2251081	
City State Zip Code Farmington MI 48335		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Schoolcraft College Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

585.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 764 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elsa N. Schultz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 50 Coe Road, #111		<b>Transaction ID:</b> 2244190	
City Belleair	State FL	Zip Code 33756	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Suzanne E. Schwartz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 1117 S. Emerson Street		<b>Transaction ID:</b> 2242346	
City Arlington	State VA	Zip Code 22204	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer U.S. EPA	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Michelle J. Schwartz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 134 Arch Street		<b>Transaction ID:</b> 2243944	
City Berkeley	State CA	Zip Code 94708	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Art Dealer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 765 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Stephen Schwartz Mailing Address 7109 McCallum St. City Philadelphia State PA Zip Code 19119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Kohn, Swift & Graf, P.C. Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242711</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Barbara B Schwartz Mailing Address 8903 Hilary Lane City Stockton State CA Zip Code 95212 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1150.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250841</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Maryanne Schwarzbach Mailing Address 1620 Pankow Drive City Geneva State IL Zip Code 60134 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer James E. Schwarzbach, Inc. Occupation Special Planner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242182</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Marysol Scott

Mailing Address 3620 Littledale Road # 215

City State Zip Code  
 Kensington MD 20895

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244300

Amount of Each Receipt this Period

200.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Margaret Seely

Mailing Address 1755 Hopkins Street

City State Zip Code  
 Berkeley CA 94707

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Oakland Public Schools

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251684

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Jean T Seiden

Mailing Address 11100 Rosemont Dr

City State Zip Code  
 North Bethesda MD 20852

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Interior Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244090

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 767 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Mr. Edward M Selfe

Mailing Address 3664 Lohe Rd

City State Zip Code  
 Kalaheo HI 96741

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self-employed

Occupation  
Musician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2244256

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Mr. Lou Serra

Mailing Address 2525 Pennsylvania Avenue

City State Zip Code  
 Weirton WV 26062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Weirton Geriatric Center

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245902

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Janice Sharpstein

Mailing Address 1435 W 27th Street

City State Zip Code  
 Miami Beach FL 33140

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Jorden Burt LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2242843

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 768 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jerri L Shaw		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 8865 Blue Sea Drive		<b>Transaction ID:</b> 2245089
City Columbia	State MD	Zip Code 21046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3200.00
Name of Employer JBS International, Inc.	Occupation Management Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jerri L Shaw		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 8865 Blue Sea Drive		<b>Transaction ID:</b> 2247495
City Columbia	State MD	Zip Code 21046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer JBS International, Inc.	Occupation Management Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Eva Shaye		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 2405 Briarcrest Road		<b>Transaction ID:</b> 2243422
City Beverly Hills	State CA	Zip Code 90210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer Self	Occupation Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

8700.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 769 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Beverly Sheldon Mailing Address 9032 Monte Mar Drive City Los Angeles State CA Zip Code 90035 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2248311 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">85.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	7	85.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	6		2	0	0	7																							
85.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Michaelyn K. Shelley-David Mailing Address 248 Walker Dr Apt 1 City Mountain View State CA Zip Code 94043 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer IBM Occupation Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2244221 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	0	7	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	5		2	0	0	7																							
100.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Deborah F. Shepherd Mailing Address 3581 Clay St City San Francisco State CA Zip Code 94118 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2246646 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		2	2		2	0	0	7																							
250.00																																

SUBTOTAL of Receipts This Page (optional) .....

435.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 770 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Betsy D. Sherman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 3001 Veazey Terrace NW Apt. 722		<b>Transaction ID:</b> 2245821	
City Washington	State DC	Zip Code 20008	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer ICMA	Occupation Association Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Susan V. Shipherd		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 10 Saddlehill Road		<b>Transaction ID:</b> 2251930	
City Wynantskill	State NY	Zip Code 12198	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Krackeler Scientific	Occupation Sale Rep.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Susan V. Shipherd		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 10 Saddlehill Road		<b>Transaction ID:</b> 2251153	
City Wynantskill	State NY	Zip Code 12198	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Krackeler Scientific	Occupation Sale Rep.		
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) .....

400.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 771 / 963

(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)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. Leonard Shlain  
Mailing Address 490 Post Street Ste. 710

City State Zip Code  
San Francisco CA 94102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	7

Transaction ID: 2242454

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Barbara L. Short  
Mailing Address 1200 Lakeshore Avenue  
Apt. 6D

City State Zip Code  
Oakland CA 94606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	7

Transaction ID: 2251146

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Joanna F Shulman  
Mailing Address 240 West 98th Street, # 10H

City State Zip Code  
New York NY 10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mount Sinai Medical CenterOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	7

Transaction ID: 2243370

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 772 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Joanna F Shulman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 240 West 98th Street, # 10H		
City	State	Zip Code
New York	NY	10025
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> 2248326 Amount of Each Receipt this Period 30.00
Name of Employer Mount Sinai Medical Center		
Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 230.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Joanna F Shulman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 240 West 98th Street, # 10H		
City	State	Zip Code
New York	NY	10025
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> 2251338 Amount of Each Receipt this Period 30.00
Name of Employer Mount Sinai Medical Center		
Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 230.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. William Siegal		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 540 S. Guadalupe Street		
City	State	Zip Code
Santa Fe	NM	87501
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> 2244708 Amount of Each Receipt this Period 250.00
Name of Employer Self		
Occupation Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

310.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 773 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Shelley Siegel Mailing Address 9 Willshire Drive City Livingston State NJ Zip Code 07039 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 05 / 17 / 2007 <b>Transaction ID: 2245963</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Donald Siegelaub Mailing Address 133 Regents Park City Westport State CT Zip Code 06880 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 18 / 2007 <b>Transaction ID: 2245640</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jeannine Bouillier Siegmond Mailing Address 2266 Cherry Hill Road City Palmerton State PA Zip Code 18071 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt MM / DD / YYYY 05 / 16 / 2007 <b>Transaction ID: 2248310</b> Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) .....

1275.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 774 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. Estelle Siker

Mailing Address 50 S. Buckboard Lane

City State Zip Code  
 Marlborough CT 06447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246985

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Arlene Silberman

Mailing Address 1629 Pelican Cove Rd  
 Apt Ba134

City State Zip Code  
 Sarasota FL 34231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250993

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Sandra Silverman

Mailing Address 131 East 93rd Street, # 3D

City State Zip Code  
 New York NY 10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Scherman Foundation

Occupation

President/Exec. Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244206

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 775 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. Jerry Silverman

Mailing Address 2640 Caminito Carino

City State Zip Code  
 La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251838

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Bridget M. Simone

Mailing Address 43 Tremlett St

City State Zip Code  
 Boston MA 02124

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Health Policy Consultant

Occupation

Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245057

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Michael A Simpson

Mailing Address 10 Somerset Place

City State Zip Code  
 Wilmington MA 01887

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mellon Financial Corp

Occupation

Accounting Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241854

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 776 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Patricia J. S. Simpson Mailing Address 130 Lincoln Place City State Zip Code Brooklyn NY 11217 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Property Owner-Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2251388</b> Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Joseph Simutis Mailing Address 75 Manchester Street City State Zip Code Nashua NH 03060 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241352</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Joseph Simutis Mailing Address 75 Manchester Street City State Zip Code Nashua NH 03060 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243305</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

5200.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Dana K. Sitnick

Mailing Address 6271 Park Road

City State Zip Code  
 McLean VA 22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245021

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Barbara C. Skelly

Mailing Address 4348 Terra Granada Drive  
 Apt. 3B

City State Zip Code  
 Walnut Creek CA 94595

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250785

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Anne R Skinner

Mailing Address 57 Woodlawn Dr.

City State Zip Code  
 Williamstown MA 01267

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Williams College

Occupation

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246440

Amount of Each Receipt this Period

100.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 778 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Patricia E. Sklar Mailing Address 2704 W. Morse Avenue City Chicago State IL Zip Code 60645 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer sklar & Associates Occupation recruiter Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247425</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Jane A Slack Mailing Address 7247 San Luis City Carlsbad State CA Zip Code 92011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245112</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Phyllis Sletten Mailing Address 200 Family Farm Road City Woodside State CA Zip Code 94062 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2251352</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 779 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Kak Slick Mailing Address PO Box 2184 City Las Vegas State NM Zip Code 87701 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2240935</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Charlotte F. Sloan Mailing Address 402 Huntington Road City Greenville State SC Zip Code 29615 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247743</b> Amount of Each Receipt this Period 200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Katherine G. Sluka Mailing Address 925 23rd Street City Cody State WY Zip Code 82414 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243292</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 780 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Martha C Smith Mailing Address 1 Colley Ave Apt 12 City Norfolk State VA Zip Code 23510 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244764</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Martha C Smith Mailing Address 1 Colley Ave Apt 12 City Norfolk State VA Zip Code 23510 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2247161</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Patricia K. Smith Mailing Address 17475 Frances St Apt 1010 City Omaha State NE Zip Code 68130 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244900</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 781 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Bruce Smith Mailing Address 26139 Timberline Drive City San Antonio State TX Zip Code 78258 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Mechanical Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251110</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Rosealma Smith Mailing Address 2919 26th Avenue W City Seattle State WA Zip Code 98199 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2248177</b> Amount of Each Receipt this Period 200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Polly P Smith Mailing Address 307 East 12th Street #4B City New York City State NY Zip Code 10003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Freelance Occupation Costume Designer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 510.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244202</b> Amount of Each Receipt this Period 85.00

**SUBTOTAL** of Receipts This Page (optional) .....

785.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 782 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mr. Christopher Smith

Mailing Address 3935 Morrison Street NW

City State Zip Code  
 Washington DC 20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Property Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2242022

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

Dr. Robert E Smith

Mailing Address 400 Holt Road

City State Zip Code  
 Highlands NC 28741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250175

Amount of Each Receipt this Period

65.00

C. Full Name (Last, First, Middle Initial)

Mrs. Isabelle F. Smith

Mailing Address 612 Gloucester Avenue

City State Zip Code  
 Middlesboro KY 40965

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247080

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1315.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 783 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mr. Loren E. Smith

Mailing Address P.O. Box 953

City State Zip Code  
 El Prado NM 87529

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Marketing Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245800

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Mr. Loren E. Smith

Mailing Address P.O. Box 953

City State Zip Code  
 El Prado NM 87529

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Marketing Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251180

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Ms. Rhona Marks Smulian

Mailing Address 270 Marinero Court

City State Zip Code  
 Coral Gables FL 33143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Revision/Flowers

Occupation  
Artist Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242717

Amount of Each Receipt this Period

1000.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 784 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Frances H. Snedeker Mailing Address 20 Linden Ave City Larchmont State NY Zip Code 10538 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 352.50		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248334</b> Amount of Each Receipt this Period 16.50
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jeanne Snodgrass Mailing Address 10501 Lagrima De Oro NE City Albuquerque State NM Zip Code 87111 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243662</b> Amount of Each Receipt this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Gracemary G. Snyder Mailing Address 10450 Lottsford Road Apt. 335 City Mitcheville State MD Zip Code 20721 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 2248129</b> Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional) .....

531.50

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 785 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Sharon G Socol Mailing Address 11 Tahiti Beach City State Zip Code Coral Gables FL 33143 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Photographer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 05 / 01 / 2007 <b>Transaction ID: 2241964</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Dorothy Sohm Mailing Address 4824 East Indianapolis Avenue City State Zip Code Fresno CA 93726 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt MM / DD / YYYY 05 / 01 / 2007 <b>Transaction ID: 2241325</b> Amount of Each Receipt this Period 750.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Nancy F Solomon Mailing Address 151 Central Park West City State Zip Code New York NY 10023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 14 / 2007 <b>Transaction ID: 2244074</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 786 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth T Soloway

Mailing Address 755 Solana Drive

City State Zip Code  
Lafayette CA 94549

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244228

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Dr. Barbara C Sorkin

Mailing Address 6760 Kenwood Forest Lane

City State Zip Code  
Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DHHS/NIH

Occupation  
Scientist/Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248562

Amount of Each Receipt this Period

80.00

**C.** Full Name (Last, First, Middle Initial)

Mrs. Viola Spalding

Mailing Address 43641 Henson Road

City State Zip Code  
Hempstead TX 77445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246271

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 787 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Dr. Mary Helen Spear  
Mailing Address 190 South Shore Road

City State Zip Code  
Swanton MD 21561

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prince George's Community  
Col

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248037

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Alice W. Specht  
Mailing Address 918 Grand Avenue

City State Zip Code  
Abilene TX 79605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hardin-Simmons University

Occupation  
Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248649

Amount of Each Receipt this Period

85.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Bonnie A. Speck  
Mailing Address 5 Woodside Park Boulevard

City State Zip Code  
Pleasant Ridge MI 48069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wayne State Univ.

Occupation  
Teaching Asst.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248192

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

335.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 788 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary Couri Spence Mailing Address 403 Lake Cliff Trail City Austin State TX Zip Code 78746 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2240852</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Vaino Spencerr Mailing Address 1808 Wellington Road City Los Angeles State CA Zip Code 90019 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Justice Court Appeal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245194</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Dancy L Spergel Mailing Address 130 Maison Pl. NW City Atlanta State GA Zip Code 30327 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245053</b> Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 789 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

A. Mrs. Sydney B. Spofford

Mailing Address 1954 Michigan Avenue

City State Zip Code  
 Marysville MI 48040

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241917

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Dr. Duane C. Spriestersbach

Mailing Address 2 Longview Knoll NE

City State Zip Code  
 Iowa City IA 52240

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246275

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Ms. Mae Stadler

Mailing Address 28 Bretano Way

City State Zip Code  
 Greenbrae CA 94904

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242488

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 790 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Mae Stadler

Mailing Address 28 Bretano Way

City State Zip Code  
 Greenbrae CA 94904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250131

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)

Mr. David G. Stahl, D.M.D.

Mailing Address 100 Magnolia Road

City State Zip Code  
 Manchester NH 03104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245856

Amount of Each Receipt this Period

75.00

C. Full Name (Last, First, Middle Initial)

Ms. Jane Stanicki

Mailing Address 35 East 85th Street, Apt. 8Bn

City State Zip Code  
 New York NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244525

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 791 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary B. Stark Mailing Address 2900 W. Park Blvd. City State Zip Code Shaker Hts OH 44120 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251825</b> Amount of Each Receipt this Period 200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Julia M. Stasch Mailing Address 556 W Arlington Pl City State Zip Code Chicago IL 60614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation MacArthur Foundation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242720</b> Amount of Each Receipt this Period 2500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Linda M. Staubitz Mailing Address 6251 E Placita Aspecto City State Zip Code Tucson AZ 85750 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation none homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7 <b>Transaction ID: 2242667</b> Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

**4200.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 792 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. John B. Stearns

Mailing Address 73 Margin Street, Apt. T1

City State Zip Code  
 Peabody MA 01960

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2250328

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Pat M. Steck

Mailing Address 28W480 Washington av

City State Zip Code  
 Winfield IL 60190

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2242838

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Mrs. Lael Stegall

Mailing Address 102 Old Place Road

City State Zip Code  
 Deer Isle ME 04627

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2241755

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

625.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Georgia Phelps Steiger

Mailing Address 2131 Lakeview Drive  
604 Fountainhead

City State Zip Code  
Sebring FL 33870

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246669

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Patricia Stein

Mailing Address 511 Willow Drive

City State Zip Code  
Olathe KS 66062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NCES

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241254

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Mary Ann Stein

Mailing Address 5643 Bent Branch Road

City State Zip Code  
Bethesda MD 20816

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Moriah Fund

Occupation

atty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247528

Amount of Each Receipt this Period

4000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Karen Stein

Mailing Address PO Box 1663

City State Zip Code  
 Kingston RI 02881

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University of Rhode Island

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252520

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Susan A. Steinacher

Mailing Address PO Box 1609  
 502 Spinning Rock

City State Zip Code  
 Nome AK 99762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AK Dept of Fish & GAME

Occupation  
Wildlife Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244071

Amount of Each Receipt this Period

50.00

**C.** Full Name (Last, First, Middle Initial)

Dr. Joan K. Stemmler

Mailing Address 71 Split Rock Trl

City State Zip Code  
 Roseland VA 22967

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250716

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lynn E. Stephan Mailing Address 35 Via Verde Street City State Zip Code Wichita KS 67230 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Grad Student Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247779</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Darryl Stephens Mailing Address 3014 Military Rd., NW City State Zip Code Washington DC 20015 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Federal Contractor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244945</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Kimberly Sterling Mailing Address 2511 Ella Lee Lane City State Zip Code Houston TX 77019 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242099</b> Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Judith H. Sterling Mailing Address 4932 Crestwood Drive City Waco State TX Zip Code 76710 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250014</b> Amount of Each Receipt this Period 40.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Roanne N Stern Mailing Address 1400 Hermann Drive #17E City Houston State TX Zip Code 77004 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Photographer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244194</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Clarice Stetter Mailing Address 1040 Elmwood Avenue City Wilmette State IL Zip Code 60091 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243603</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

540.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Kim Stevens		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7
Mailing Address 384 Redondo Beach Apartment #305		<b>Transaction ID:</b> 2251083
City Long Beach	State CA	Zip Code 90814
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Compton Unified School D	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Betty Stevens		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7
Mailing Address 400 Seabury Drive, Apt 3189		<b>Transaction ID:</b> 2241293
City Bloomfield	State CT	Zip Code 06002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Carol Stix		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 112 Carthage Road		<b>Transaction ID:</b> 2250755
City Scarsdale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Hazel S Stix Mailing Address 231 Brookstone Drive City State Zip Code Princeton NJ 08540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Gloria Nilson GMAC Occupation real estate sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 6 / 2 0 0 7 <b>Transaction ID: 2242206</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Tracy Stone Mailing Address 2041 Blake Ave City State Zip Code Los Angeles CA 90039 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248524</b> Amount of Each Receipt this Period 85.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Norma K Stone Mailing Address 3601 Turtle Creek Blvd. #404 City State Zip Code Dallas TX 75219 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1600.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244075</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1085.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joyce Steves Storm Mailing Address 232 E 68th Street City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241019</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Virginia F. Stout Mailing Address 2822 10th Avenue E City Seattle State WA Zip Code 98102 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Counselor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241894</b> Amount of Each Receipt this Period 350.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Rosemary G. Straley Mailing Address 5708 Fairway Knoll Lane City Santa Rosa State CA Zip Code 95403 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250765</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Fleur L Strand Mailing Address P.O.Box 6359 City State Zip Code Snowmass Village CO 81615 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation NYU Retired Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>3000.00</div>		Date of Receipt <div>05 / 14 / 2007</div> <b>Transaction ID: 2244079</b> Amount of Each Receipt this Period <div>1000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Anne Straus Mailing Address 1351 East 56th Street City State Zip Code Chicago IL 60637 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>400.00</div>		Date of Receipt <div>05 / 04 / 2007</div> <b>Transaction ID: 2242439</b> Amount of Each Receipt this Period <div>150.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Anne Straus Mailing Address 1351 East 56th Street City State Zip Code Chicago IL 60637 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>400.00</div>		Date of Receipt <div>05 / 31 / 2007</div> <b>Transaction ID: 2252452</b> Amount of Each Receipt this Period <div>250.00</div>

**SUBTOTAL** of Receipts This Page (optional) .....

**1400.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth L. Strauss

Mailing Address 10 Haight Road

City State Zip Code  
Amenia NY 12501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248164

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert A. Strauss

Mailing Address 1611 North Wilmot  
Suite 108A

City State Zip Code  
Tucson AZ 85712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Strauss Foundation

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251888

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joyce R. Strauss

Mailing Address 566 Canyon Drive

City State Zip Code  
Solana Beach CA 92075

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242722

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Anita Strauss Mailing Address 7887 Revelle Drive City La Jolla State CA Zip Code 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer S.D. Mental Health Association Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243348</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Celia J. Stuart-Powles Mailing Address 3610 E. 24th Street City Tulsa State OK Zip Code 74114 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Fluor Daniel Wms. Bros. Occupation Electrical Designer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248853</b> Amount of Each Receipt this Period 85.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Richard J Stuckey Mailing Address 1931 N. Fremont St City Chicago State IL Zip Code 60614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246480</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

435.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** McCawley Suits

Mailing Address 710 Brooks St

City State Zip Code  
 Ann Arbor MI 48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244294

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Karen Sundback

Mailing Address 21 Kenmore Road

City State Zip Code  
 Bloomfield CT 06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251106

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Ellie Sutter

Mailing Address 3627 Klamath Street

City State Zip Code  
 Oakland CA 94602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2251000

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 804 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Gloria A. Swanson			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1116 Leisure Drive			<b>Transaction ID:</b> 2243654	
City Flint State MI Zip Code 48507		Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation REQUESTED				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Joseph J. Sweeney			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 18929 Monte Vista Drive			<b>Transaction ID:</b> 2240934	
City Saratoga State CA Zip Code 95070		Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation REQUESTED				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Janet Switzer, Ph.D.			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 4444 Via Pinzon			<b>Transaction ID:</b> 2245373	
City Palos Verdes Ests State CA Zip Code 90274		Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation Retired				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 805 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Ruth Sylwester Mailing Address 2027 Coventry Way City Eugene State OR Zip Code 97405 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248620</b> Amount of Each Receipt this Period 85.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mary Louise Symon Mailing Address 318 S Lexington Street City Spring Green State WI Zip Code 53588 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246930</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Anne C. Symonds Mailing Address 2625 13th Avenue W. Apt. 401 City Seattle State WA Zip Code 98119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer PACE Engineers Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2247925</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

435.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 806 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Jean Szilva Mailing Address 48 Lafountain St City State Zip Code Winooski VT 05404 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation University of Vermont Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>250.00</div>		Date of Receipt <div>05 / 11 / 2007</div> <b>Transaction ID: 2243755</b> Amount of Each Receipt this Period <div>250.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. June M. Tablak Mailing Address 1905 Adele Place City State Zip Code San Jose CA 95125 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>300.00</div>		Date of Receipt <div>05 / 21 / 2007</div> <b>Transaction ID: 2247790</b> Amount of Each Receipt this Period <div>100.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Estelle Tafoya Mailing Address P.O. Box 598 City State Zip Code Red Lodge MT 59068 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>250.00</div>		Date of Receipt <div>05 / 02 / 2007</div> <b>Transaction ID: 2241959</b> Amount of Each Receipt this Period <div>25.00</div>

**SUBTOTAL** of Receipts This Page (optional) .....

**375.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 807 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Dr. Estelle Tafoya

Mailing Address P.O. Box 598

City State Zip Code  
 Red Lodge MT 59068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249101

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)

Mrs. Martha H. Talbot

Mailing Address 6656 Chilton Court

City State Zip Code  
 McLean VA 22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244821

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)

Ms. Margaret Tao

Mailing Address 359 Stockbridge Avenue

City State Zip Code  
 Atherton CA 94027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241157

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1775.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 808 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Nancy E. Tate

Mailing Address 1119 N. Inglewood St.

City State Zip Code  
Arlington VA 22205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Natl Academy of Public Ad-  
min.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245710

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Dr. Priscilla W Tate

Mailing Address 6612 Meadowpark Ct.

City State Zip Code  
Benbrook TX 76132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248680

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Mary Tavarozzi

Mailing Address 12301 Baypointe Ter

City State Zip Code  
Cortez FL 34215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Towers Perrin

Occupation  
Employee Benefits Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247281

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 809 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Penelope A. Taylor

Mailing Address 1643 Seascap Blvd.

City State Zip Code  
 Aptos CA 95003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2248744

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Julia B. Taylor

Mailing Address 441 Clairmont Avenue Apt. 704

City State Zip Code  
 Decatur GA 30030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243176

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Jape Taylor

Mailing Address 500 NW 80th Blvd

City State Zip Code  
 Gainesville FL 32607

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246793

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

585.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 810 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Carol J Teal Mailing Address 3109 Cartwright Dr. City Raleigh State NC Zip Code 27612 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Lillian's List of NC Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1070.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248640</b> Amount of Each Receipt this Period 84.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Phoebe S. Telser Mailing Address 13368 Grandvia Point City San Diego State CA Zip Code 92130 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243999</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Shirley T. Thatcher Mailing Address 3663 Thorn Road City Sebastopol State CA Zip Code 95472 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248356</b> Amount of Each Receipt this Period 10.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		344.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 811 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Pamela Thayer

Mailing Address 48 Beaver Pond Road

City State Zip Code  
 Lincoln MA 01773

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248236

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B.** Mr. Bernard Theisen

Mailing Address 1404 Kensington Rd

City State Zip Code  
 Grosse Pointe Park MI 48230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Legal Aid and Defenders  
Association

Occupation  
Paralegal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2248035

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Bruce Theunissen

Mailing Address 10815 Hayfield Drive

City State Zip Code  
 Dallas TX 75238

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2247806

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 812 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Carolyn Thomas

Mailing Address 1 Town House Drive

City State Zip Code  
 Newtonville MA 02460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251958

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Miss Megan Thomas

Mailing Address 1173 Colusa Avenue

City State Zip Code  
 Berkeley CA 94707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252518

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Deborah Thomas

Mailing Address PO Box 1366

City State Zip Code  
 Fayetteville AR 72702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246818

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 813 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Mary Thomasset Mailing Address 147 Woodcrest Avenue City State Zip Code White Plains NY 10604 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Bouse Planners LTD Tax Preparer/Financial Planner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251948</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Judith Thompson Mailing Address 3427 Black Willow Trail City State Zip Code DeLand FL 32724 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2247128</b> Amount of Each Receipt this Period 5000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Dorothy Thompson Mailing Address 5130 Burr Oaks Road City State Zip Code Oklahoma City OK 73105 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251972</b> Amount of Each Receipt this Period 50.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		5300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Kimberly M. Thompson

Mailing Address 6401 Shellmound Street  
Apt. 7410

City State Zip Code  
Emeryville CA 94608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251637

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)

S. K. Thomson

Mailing Address PO Box 311

City State Zip Code  
Paramus NJ 07653

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242322

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

S. K. Thomson

Mailing Address PO Box 311

City State Zip Code  
Paramus NJ 07653

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252434

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 815 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Katherine R. Thorpe

Mailing Address 5551 Dunrobin  
Apt. 4402

City State Zip Code  
Sarasota FL 34238

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251492

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Eugene Threadgill

Mailing Address 1026 Delf Drive

City State Zip Code  
McLean VA 22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247006

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Frances Tibbits

Mailing Address P.O. Box 205

City State Zip Code  
Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246503

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 816 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Grace W Tiessen Mailing Address 714 Prospect Blvd City Pasadena State CA Zip Code 91103 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2242156</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Grace W Tiessen Mailing Address 714 Prospect Blvd City Pasadena State CA Zip Code 91103 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244080</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Grace W Tiessen Mailing Address 714 Prospect Blvd City Pasadena State CA Zip Code 91103 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248313</b> 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)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Johanna Tilbury Mailing Address PO Box 2595 City Kamuela State HI Zip Code 96743 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248375</b> Amount of Each Receipt this Period 40.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Anita A. Timmons Mailing Address P.O. Box 31067 City Sea Island State GA Zip Code 31561 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7 <b>Transaction ID: 2243539</b> Amount of Each Receipt this Period 2000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Anne Tirone Mailing Address 30 Stonybrook Lane City Buffalo State NY Zip Code 14221 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2248217</b> Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) .....

2190.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Bess M. Tittle  
Mailing Address 6046 Kantor Street

City State Zip Code  
San Diego CA 92122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250878

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Linda Toeniskoetter  
Mailing Address 25570 Firhaven Lane

City State Zip Code  
Los Gatos CA 95033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 7

Transaction ID: 2243560

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Karen Jo Torjesen  
Mailing Address 2062 Drury Court

City State Zip Code  
Claremont CA 91711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Claremont Graduate School

Occupation

Prof.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: 2243220

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 819 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Judy L. Trabulsi			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 828 West 6th Street			<b>Transaction ID:</b> 2241224	
City State Zip Code Austin TX 78703			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer GSD&M Advertising		Occupation Advertising and Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marjorie Traub			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 2760 Vallejo Street			<b>Transaction ID:</b> 2244076	
City State Zip Code San Francisco CA 94123			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Barbara K. Traum			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 7325 Heritage Palms Estate Dr			<b>Transaction ID:</b> 2248580	
City State Zip Code Fort Myers FL 33912			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Student		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Merle Tresser		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 1643 N Larrabee Street Unit I		<b>Transaction ID:</b> 2244233	
City State Zip Code Chicago IL 60614		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Tresser Marketing Resources		Occupation consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Phyllis Tribble		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 549 W. 123rd Street, Apt. 21C		<b>Transaction ID:</b> 2251491	
City State Zip Code New York NY 10027		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Union Theological Seminary		Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Rita M. Triviz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 2059 Cotton Ave		<b>Transaction ID:</b> 2250945	
City State Zip Code Las Cruces NM 88001		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Las Cruces Public Schools		Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Camille Truchel Mailing Address 418 West 46 Street City New York State NY Zip Code 10036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer DC Comics Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249512</b> Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marie Tuthill Mailing Address 7614 Lake Adlon Drive City San Diego State CA Zip Code 92119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Dick-Con Corp. Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2247119</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jan S. Tuttleman Mailing Address 7791 Starlight Drive City La Jolla State CA Zip Code 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247782</b> Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 822 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Peggy Ulrich-Nims

Mailing Address 28 Donovan Farm Way

City State Zip Code  
 Norwell MA 02061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252244

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Carol R. Upham

Mailing Address 2191 Knapp Street

City State Zip Code  
 Saint Paul MN 55108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
RETRIED RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244775

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Sally S. Venerable

Mailing Address 5000 SW 25th Blvd. #1105

City State Zip Code  
 Gainesville FL 32608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245685

Amount of Each Receipt this Period

1000.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 823 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Harriet G. Vicente

Mailing Address One West 67th Street, Apt. 606

City State Zip Code  
 New York NY 10023

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2241316

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Harriet G. Vicente

Mailing Address One West 67th Street, Apt. 606

City State Zip Code  
 New York NY 10023

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251752

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Polly N Victor

Mailing Address 5543 N. Fresno Apt. D

City State Zip Code  
 Fresno CA 93710

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 2244583

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 824 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Patricia P Voelz Mailing Address 3055 Bentwater Dr City State Zip Code Montgomery TX 77356 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247514</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Judith Voet Mailing Address 9 Tanglewood Circle City State Zip Code Rose Valley PA 19086 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Swarthmore College Retired professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244270</b> Amount of Each Receipt this Period 150.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Peter H. VonHippel Mailing Address 1900 Crest Drive City State Zip Code Eugene OR 97405 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation U of Oregon Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246155</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 825 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lynn Voss Mailing Address 10615 W Dumbarton Cr #D City Littleton State CO Zip Code 80127 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Great-West Life Occupation supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247810</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Betty L. Wagner Mailing Address 900 University St Apt 17Q City Seattle State WA Zip Code 98101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Univ. of Washington Occupation Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244919</b> Amount of Each Receipt this Period 150.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Roslyn E. Walker Mailing Address 13600 Marina Pointe Drive # 1406 City Marina Del Rey State CA Zip Code 90292 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243355</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 826 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Diana Walker Mailing Address 3414 Lowell Street NW City Washington State DC Zip Code 20016 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2247692</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Ed L. Wallace Mailing Address 2100 Ellis Avenue City Huntingdon State PA Zip Code 16652 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245410</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Joan C. Waller Mailing Address 6310 Meadowcreek Drive City Dallas State TX Zip Code 75254 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Secore & Waller LLP Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2240932</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 827 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Barbara M. Walls  
Mailing Address 16836 N. 111th Avenue

City State Zip Code  
Sun City AZ 85351

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246474

Amount of Each Receipt this Period

25.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Ann Walraven  
Mailing Address 209 Menlo Park Road

City State Zip Code  
Schenectady NY 12309

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2249224

Amount of Each Receipt this Period

85.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Laura Walshin  
Mailing Address 16 Irongate

City State Zip Code  
Metuchen NJ 08840

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244276

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

210.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 828 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mr. E. Landon Walston

Mailing Address 12617 Coconut Creek Court

City State Zip Code  
 Ft. Myers FL 33908

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248233

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Wende R. Walter

Mailing Address 111 Lake Shore Drive

City State Zip Code  
 Rancho Mirage CA 92270

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245075

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ms. Barbara K. Walter

Mailing Address 1175 W Aberdeen Road

City State Zip Code  
 Palatine IL 60067

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Northwet Electrical Supply  
 Co.

Occupation

Pers. Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247256

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 829 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Ada Walters Mailing Address 5124 Greenway Cv City Memphis State TN Zip Code 38117 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251207</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sarah Walters Mailing Address 60 Baldwin Street Apt. 2 City Charlestown State MA Zip Code 02129 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Goodwin Procter Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241269</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ann Wansley Mailing Address 51 Chula Lane City San Francisco State CA Zip Code 94114 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242082</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 830 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Carol J. Ward		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 2001 Tower Drive Apartment 207		<b>Transaction ID:</b> 2241907	
City Glenview	State IL	Zip Code 60026	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Patricia G. Ward		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 412 Stanley Drive		<b>Transaction ID:</b> 2248641	
City Santa Barbara	State CA	Zip Code 93105	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Rebecca M. Wareham		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 235 NE 61st Road		<b>Transaction ID:</b> 2248163	
City Warrensburg	State MO	Zip Code 64093	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer 	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 831 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Doris Waring

Mailing Address 2911 NW 13th Place

City State Zip Code  
 Corvallis OR 97330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250965

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Ms. Ada W. Warner

Mailing Address 7 Roberts Road

City State Zip Code  
 Newtown Sq PA 19073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245797

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Mr. Philip F Warner

Mailing Address 9602 Montauk Ave.

City State Zip Code  
 Bethesda MD 20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240851

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 832 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Sandra Watson

Mailing Address 2982 Corte Hermosa

City State Zip Code  
 Newport Beach CA 92660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
cal rep

Occupation  
sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2248231

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Carol Wayman

Mailing Address 1744 U Street NW  
 Unit H

City State Zip Code  
 Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Nat Congress for Comm Econ  
Dev

Occupation  
Policy Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247531

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Merryl J. Weber

Mailing Address 5808 Varna Avenue

City State Zip Code  
 Van Nuys CA 91401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
none

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242137

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 833 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Helga Wedemeyer Mailing Address 880 Sky High Road City Tully State NY Zip Code 13159 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244931</b> Amount of Each Receipt this Period 150.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Dorothy Weigand Mailing Address 719 Maiden Choice Lan. Apt. BR233 City Catonsville State MD Zip Code 21228 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242461</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary Weinland Mailing Address 2 Nutmeg Court City Mansfield Center State CT Zip Code 06250 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250923</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 834 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Linda Weiser Mailing Address 3364 Tacoma Circle City Ann Arbor State MI Zip Code 48108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251929</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Paul E. Weiss Mailing Address 101 Alma Apt. PHB City Palo Alto State CA Zip Code 94301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242466</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ann Weiss Mailing Address 210 W Poplar St City Greencastle State IN Zip Code 46135 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242355</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 835 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Harriet Weiss Mailing Address 415 E 52nd Street, Apt. 9HC City New York State NY Zip Code 10022 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244823</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Rhoda Weisz Mailing Address 500 East Marylyn Avenue, #A-1 City State College State PA Zip Code 16801 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252238</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Patricia D. Welch Mailing Address 1755 Michigan Street City Algonac State MI Zip Code 48001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2249922</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 836 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Magda Wendorff Mailing Address 2913 Windmill Road City Torrance State CA Zip Code 90505 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252504</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ellen Werback Mailing Address 529 Kevin Court City Ridgecrest State CA Zip Code 93555 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Piano Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241332</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Suzanne E. West Mailing Address 203 Tareyton Drive City Ithaca State NY Zip Code 14850 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer self Occupation massage therapist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2247829</b> Amount of Each Receipt this Period 180.00

**SUBTOTAL** of Receipts This Page (optional) .....

**930.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 837 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Ruth W. Westheimer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 2412 Ingleside Avenue Apt. 2B		<b>Transaction ID:</b> 2243998
City Cincinnati State OH Zip Code 45206	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Henrietta Wexler		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 4450 S Park Ave APT 1207		<b>Transaction ID:</b> 2242679
City Chevy Chase State MD Zip Code 20815	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Wilma A Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address P.O. Box 4008		<b>Transaction ID:</b> 2243537
City Mammoth State CA Zip Code 93546	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 838 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jo Whetzel Mailing Address 5036 Castleman Street City State Zip Code Pittsburgh PA 15232 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244544</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Susan White Mailing Address 12 Blanchard Road City State Zip Code Cambridge MA 02138 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241111</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Dorothy J. White Mailing Address 2115 1st Avenue SE # 3220 City State Zip Code Cedar Rapids IA 52402 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 2251965</b> Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 839 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Theda Z White Mailing Address 6 Greenmeadow Road City Pleasantville State NY Zip Code 10570 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243781</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Anne S. White Mailing Address P.O. Box 638, 203 Lorimer Rd. City Davidson State NC Zip Code 28036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 2245894</b> Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Jolly Ann Whitener Mailing Address 10 Oak Hollow Drive City St. Peters State MO Zip Code 63376 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID: 2247208</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 840 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Dorothy G. Whitmore Mailing Address 1309 N. Clayton Street City State Zip Code Wilmington DE 19806 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246756</b> Amount of Each Receipt this Period 300.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Billie L. Whittaker Mailing Address 1018 Lavender Place City State Zip Code Hercules CA 94547 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248246</b> Amount of Each Receipt this Period 50.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Whittall Mailing Address 2300 Indian Creek Boulevard Apartment C-121 City State Zip Code Vero Beach FL 32966 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID: 2241900</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 841 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joan Hohlt Wich Mailing Address 3122 Ferndale Street City State Zip Code Houston TX 77098 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246414</b> Amount of Each Receipt this Period 4400.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Judith D. Widmann Mailing Address 3 Pryer Lane City State Zip Code Larchmont NY 10538 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NY Hospital Occupation Genetic Counselor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243183</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Dianne Widzinski Mailing Address 2940 Devonshire Rd City State Zip Code Ann Arbor MI 48104 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer University of Michigan Occupation Theater Hall Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243159</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

5650.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 842 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Judith Wiesberg Mailing Address 4852 Marlborough Drive City San Diego State CA Zip Code 92116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245125</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Diane Wilbur Mailing Address 11555 Mountain Wood Drive City Thompsonville State MI Zip Code 49683 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 2242470</b> Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Teresa L Wilde Mailing Address 4847 Alminar Avenue City La Canada State CA Zip Code 91011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Bank of America Occupation Banker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2248822</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 843 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Laura Wilhelm			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 2901 W. Farragut Avenue Apt. 1S			<b>Transaction ID:</b> 2251191	
City State Zip Code Chicago IL 60625			Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Swedish Covenant Hospt.		Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Karen Wilkins			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 2639 E Lake Shore Dr			<b>Transaction ID:</b> 2247470	
City State Zip Code Grayling MI 49738			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Karen Wilkins			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 2639 E Lake Shore Dr			<b>Transaction ID:</b> 2252388	
City State Zip Code Grayling MI 49738			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 844 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Cynthia Willauer

Mailing Address 55-1 Beaver Brook Road

City State Zip Code  
 Lyme CT 06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246904

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Dr. Barbara I Williams

Mailing Address 13601 Belle Chasse Blvd  
 Unit 414

City State Zip Code  
 Laurel MD 20707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Westat

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251221

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Ms. Edie Williams

Mailing Address 1869 Sabal Palm Drive

City State Zip Code  
 Edgewater FL 32141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 2247099

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

390.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 845 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jane B Williams Mailing Address 27 Nickerson Road City Lexington State MA Zip Code 02421 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2242830</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Phyllis E. Williams Mailing Address 505 Trail Drive City Moss Landing State CA Zip Code 95039 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247371</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ethel J. Williams Mailing Address 5905 Beach Drive SW City Seattle State WA Zip Code 98136 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 2252514</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

**2250.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 846 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. Kathryn A. Williams

Mailing Address 70 La Cuesta

City State Zip Code  
 Orinda CA 94563

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2242018

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Louise Boyer Williams

Mailing Address 750 Weaver Dairy Road, Apt 239

City State Zip Code  
 Chapel Hill NC 27514

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242429

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Marilyn L. Williamson

Mailing Address 2275 Oakway Drive

City State Zip Code  
 West Bloomfield MI 48324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 2244925

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 847 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Donna L. Williamson Mailing Address 52 Nace Avenue City State Zip Code Piedmont CA 94611 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2250239</b> Amount of Each Receipt this Period 85.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joan Willingham Mailing Address 1159 Fulton City State Zip Code Palo Alto CA 94301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Social Worker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245957</b> Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Karen E. Willis Mailing Address P.O. Box 435 City State Zip Code Fincastle VA 24090 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation VAMC, Salem Social Work Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID: 2250822</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1335.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 848 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Della Willmann Mailing Address 122 Tamiami Trail City State Zip Code W Lafayette IN 47906 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2241306</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Della Willmann Mailing Address 122 Tamiami Trail City State Zip Code W Lafayette IN 47906 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246754</b> Amount of Each Receipt this Period 200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Robin G Willner Mailing Address 315 Riverside Drive # 10C City State Zip Code New York NY 10025 FEC ID number of contributing federal political committee. C Name of Employer Occupation IBM Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247530</b> Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 849 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Susan N Wilson Mailing Address 4574 Province Line Road City Princeton State NJ Zip Code 08540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244379</b> Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Claudette G. Wilson Mailing Address 8605 Cliffridge Avenue City La Jolla State CA Zip Code 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wilson Petty Kosmo + Turner Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243217</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary L. Wilson Mailing Address PO Box 1 City Taftsville State VT Zip Code 05073 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244284</b> Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) .....

1450.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 850 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elaine K. Winik		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 100 Sunrise Avenue Apt. 325		<b>Transaction ID:</b> 2247760	
City Palm Beach	State FL	Zip Code 33480	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Marc Winkelman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 304 Hillcrest Court		<b>Transaction ID:</b> 2241223	
City Austin	State TX	Zip Code 78746	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation Calendar Club CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Barbara C Winthrop		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 1672 Pinehurst Ave		<b>Transaction ID:</b> 2248040	
City St. Paul	State MN	Zip Code 55116	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 851 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Barbara C Winthrop Mailing Address 1672 Pinehurst Ave City St. Paul State MN Zip Code 55116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2252044 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	1		2	0	0	7	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	5		3	1		2	0	0	7																								
100.00																																	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Carole J Witt Mailing Address 402 Harrison Place City Ambler State PA Zip Code 19002 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2250284 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">65.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	7	65.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	5		1	6		2	0	0	7																								
65.00																																	
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Eve Wittenberg Mailing Address 51 Moore Road City Wayland State MA Zip Code 01778 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2241791 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	5		0	2		2	0	0	7																								
250.00																																	

SUBTOTAL of Receipts This Page (optional) .....

415.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 852 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Jeanne D. Wohlers

Mailing Address 190 Fox Hollow Road

City State Zip Code  
Woodside CA 94062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Corporate director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 10 / 2007

Transaction ID: 2243642

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Ms. Sandra Wolens

Mailing Address 1010 Van Buren Street

City State Zip Code  
Madison WI 53711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Unemployed

Occupation  
Physical Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 21 / 2007

Transaction ID: 2246347

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Dr. Wendy C. Wolf

Mailing Address 105 Laurier Place

City State Zip Code  
Bryn Mawr PA 19010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 04 / 2007

Transaction ID: 2242485

Amount of Each Receipt this Period

3500.00

**SUBTOTAL** of Receipts This Page (optional) .....

4750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 853 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Wendy J. Wolf

Mailing Address PO Box 69

City State Zip Code

W Boothby Hbr

ME 04575

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.D.H.H.S.

Occupation  
Physician/Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2251035

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Ms. Susan Wolfe

Mailing Address 350 Campesino Avenue

City State Zip Code

Palo Alto

CA 94306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Seagate Software

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240929

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)

Ms. Elisa Wolfe

Mailing Address P.O. Box 516

City State Zip Code

Granville

OH 43023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245010

Amount of Each Receipt this Period

85.00

**SUBTOTAL** of Receipts This Page (optional) .....

635.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 854 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Toni G. Wolfman

Mailing Address 229 Brattle Street

City State Zip Code  
Cambridge MA 02138

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Foley, Hoag, & Eliot LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245806

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Mr. F. Robert Wollaeger

Mailing Address 311 Peck Street

City State Zip Code  
Sault S. Marie MI 49783

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247469

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)

Dr. Maylene Wong

Mailing Address 1661 Pine Street # 819

City State Zip Code  
San Francisco CA 94109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247202

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 855 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Margaret B. Wood Mailing Address 85 East India Row, #16F City State Zip Code Boston MA 02110 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Mass. Dept. of Education Occupation Education Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 2244262</b> Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Pamela S. Woodley Mailing Address 1691 Ridgewood Dr City State Zip Code Atlanta GA 30307 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer WatsonWyatt Occupation Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 2246200</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Cynthia Woolbright Mailing Address 667 Midship Circle City State Zip Code Webster NY 14580 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Woolbright Group Occupation Consultatnt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7 <b>Transaction ID: 2245121</b> Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) .....

425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 856 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jan Wrentmore		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address PO Box 271 Red Onion Saloon		<b>Transaction ID:</b> 2248064	
City Skagway	State AK	Zip Code 99840	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Andrew Wright		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 356 W. 11th Street		<b>Transaction ID:</b> 2244940	
City Claremont	State CA	Zip Code 91711	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Myra G Wrubel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 9 Deer Hill Road		<b>Transaction ID:</b> 2244114	
City Demarest	State NJ	Zip Code 07627	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 857 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lorraine Wulfe Mailing Address 8877 Sandringham City State Zip Code Houston TX 77024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 <b>Transaction ID:</b> 2242100 Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Rosalind Wyman Mailing Address 10430 Bellagio Road City State Zip Code Los Angeles CA 90077 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 25 / 2007 <b>Transaction ID:</b> 2251058 Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Betty Yee Mailing Address 1425 Taraval Street City State Zip Code San Francisco CA 94116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation State Board of Evaluation Acting Board Member Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 05 / 25 / 2007 <b>Transaction ID:</b> 2250997 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 858 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Betty Lou Young Mailing Address 550 Latimer Road City State Zip Code Santa Monica CA 90402 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID: 2244584</b> Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) E. Young Mailing Address P.O. Box 4624 City State Zip Code Roanoke VA 24015 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7 <b>Transaction ID: 2243267</b> Amount of Each Receipt this Period 250.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Michael Zak Mailing Address 74 Musterfield Road City State Zip Code Concord MA 01742 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243680</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 859 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Judith Zarin

Mailing Address 2211 Broadway FRNT 1

City State Zip Code  
 New York NY 10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 2242486

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)

Ms. Shelly Zegart

Mailing Address 300 Penruth Avenue

City State Zip Code  
 Louisville KY 40207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2244033

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Ms. Shelly Zegart

Mailing Address 300 Penruth Avenue

City State Zip Code  
 Louisville KY 40207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251181

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

5150.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 860 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Ardyce M. Zens

Mailing Address 380 1st Street

City State Zip Code  
 Windom MN 56101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
First United Methodist Ch-  
urch

Occupation  
Diaconal Minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2250949

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Dr. Debra A. Zillmer, M.D.

Mailing Address 22 E 60TH ST

City State Zip Code  
 Westmont IL 60559

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Gundersen Clinic

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240844

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Mr. Gary Zimmerman

Mailing Address 25 Martingale E.

City State Zip Code  
 Bluffton SC 29910

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 7 / 2 0 0 7

Transaction ID: 2242586

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 861 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Nina Zolt Mailing Address 3327 Dent Place NW City Washington State DC Zip Code 20007 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Corcoran School of Art Occupation Student Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 05 / 18 / 2007 <b>Transaction ID: 2245581</b> Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Carole Zucker Mailing Address 2275 W. 25th St. Trlr 62 City San Pedro State CA Zip Code 90732 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 05 / 25 / 2007 <b>Transaction ID: 2250907</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Harriet Johnston Mailing Address 5 Rock House Road PO Box 16381 City Portal State AZ Zip Code 85632 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3378.20		Date of Receipt MM / DD / YYYY 05 / 23 / 2007 <b>Transaction ID: 2250635</b> Amount of Each Receipt this Period 3178.20  <b>[MEMO ITEM]</b> Stock-60 Shs Fiserv, Inc.

**SUBTOTAL** of Receipts This Page (optional) .....

5250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 862 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Turbi Smilow

Mailing Address 7 Lakeside Dr

City State Zip Code  
 Lee MA 01238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245584

Amount of Each Receipt this Period

100.00

Carol Shea-Porter Earmark  
Contributions

**B.** Full Name (Last, First, Middle Initial)

Ms. Rosemary Shiras

Mailing Address P.O. BOX 11

City State Zip Code  
 Orrs Island ME 04066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243828

Amount of Each Receipt this Period

100.00

Gabby Giffords Earmark Co-  
ntributions

**C.** Full Name (Last, First, Middle Initial)

Ms. Ruth Benedict

Mailing Address 1257 W Camino De La Oca

City State Zip Code  
 Green Valley AZ 85614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alaska Seafood Internatio-  
nal

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2250654

Amount of Each Receipt this Period

100.00

Gabby Giffords Earmark Co-  
ntributions

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 863 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Wanda T. Will			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 201 W Evergreen Ave Apt 704			<b>Transaction ID:</b> 2243829	
City Philadelphia State PA Zip Code 19118		Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Hillary Clinton Earmarked Contributions		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Retired Aggregate Year-to-Date ▼ 0.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. William J. Pechilis			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 39 Jericho Road			<b>Transaction ID:</b> 2250653	
City Weston State MA Zip Code 02493		Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>		Hillary Clinton Earmarked Contributions		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Paula Roldan			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 1847 26th Road			<b>Transaction ID:</b> 2245583	
City Astoria State NY Zip Code 11102		Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>		Hillary Clinton Earmarked Contributions		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00		

**SUBTOTAL** of Receipts This Page (optional) .....

210.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 864 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Judith Ann Tickner Mailing Address 1746 Sunset Avenue City State Zip Code Santa Monica CA 90405 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer University of Southern California Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243728 Amount of Each Receipt this Period 250.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Gloria Deison Mailing Address 1311 Peacefield Place City State Zip Code Tallahassee FL 32308 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID:</b> 2242131 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Rita Wolz-Sova Mailing Address 2795 Highway 52 City State Zip Code Minooka IL 60447 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243697 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 865 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Kathy C. Stevens

Mailing Address 83 Academy Road

City State Zip Code  
 North Andover MA 01845

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242127

Amount of Each Receipt this Period

100.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

B. Full Name (Last, First, Middle Initial)

Ms. Rosemary Rowan

Mailing Address 666 Upas Street Unit 404

City State Zip Code  
 San Diego CA 92103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Belt Collins Hawaii

Occupation  
Urban Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243740

Amount of Each Receipt this Period

50.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

C. Full Name (Last, First, Middle Initial)

Dr. Thomas L. Hall

Mailing Address 1515 16th Avenue

City State Zip Code  
 San Francisco CA 94122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247602

Amount of Each Receipt this Period

50.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 866 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Julie G. Lowenberg Mailing Address 5321 Drane Drive City Dallas State TX Zip Code 75209 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 10 / 2007 <b>Transaction ID:</b> 2243736 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Penelope A. Taylor Mailing Address 1643 Seascape Blvd. City Aptos State CA Zip Code 95003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 <b>Transaction ID:</b> 2242123 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Virginia M. Lepper Mailing Address 8255 SW 97th Street City Miami State FL Zip Code 33156 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 10 / 2007 <b>Transaction ID:</b> 2243729 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 867 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Maethel Shindelman

Mailing Address PO Box 370

City State Zip Code  
 Franklin NC 28744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245547

Amount of Each Receipt this Period

50.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

**B.** Full Name (Last, First, Middle Initial)

Ms. Jacqueline E Boynton

Mailing Address 3945 N. Harcourt Place

City State Zip Code  
 Milwaukee WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Law Office of Jacqueline  
Boynton

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242139

Amount of Each Receipt this Period

100.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

**C.** Full Name (Last, First, Middle Initial)

Ms. Maureen G Gragg

Mailing Address 714 Calatrava Ave.

City State Zip Code  
 Coral Gables FL 33143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 7

Transaction ID: 2242224

Amount of Each Receipt this Period

50.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 868 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Beverly D. Johnson

Mailing Address 683 N. Kalaheo

City State Zip Code  
 Kailua HI 96734

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240857

Amount of Each Receipt this Period

100.00

Carol Shea-Porter Contrib-  
utions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**B.** Dr. Mary Lou Courge

Mailing Address 1905 Princess Street

City State Zip Code  
 Wilmington NC 28405

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243712

Amount of Each Receipt this Period

250.00

Carol Shea-Porter Contrib-  
utions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Muriel T. Asbornsen

Mailing Address PO Box 26  
 Sheepfold Farm

City State Zip Code  
 Stuyvesant NY 12173

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243718

Amount of Each Receipt this Period

200.00

Carol Shea-Porter Contrib-  
utions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 869 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert Bridgham Mailing Address PO Box 242 City State Zip Code Eaton Center NH 03832 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID:</b> 2242153 Amount of Each Receipt this Period 200.00 Carol Shea-Porter Contrib- utions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn C. Pizer Mailing Address 115 Stateside Drive City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Binkley Preschool Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID:</b> 2245549 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contrib- utions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Michael Litt Mailing Address 92 Wheatherstone PI City State Zip Code Lake Oswego OR 97035 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Oregon Health & Science university Prof. Emeritus Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID:</b> 2244099 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contrib- utions <b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 870 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Marilyn Wolper  
Mailing Address 660 Woodside Drive

City State Zip Code  
Woodside CA 94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243775

Amount of Each Receipt this Period

50.00

Carol Shea-Porter Contrib-  
utions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Barbara P. Ruskin  
Mailing Address 140 Spring Street

City State Zip Code  
Watertown MA 02472

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
unemployed--and I'm not  
contributing m

Occupation  
group worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243778

Amount of Each Receipt this Period

50.00

Carol Shea-Porter Contrib-  
utions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ruth Leventhal  
Mailing Address 4211 Jonathan Lane

City State Zip Code  
Harrisburg PA 17110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243825

Amount of Each Receipt this Period

50.00

Carol Shea-Porter Contrib-  
utions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 871 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Carol Morrison Mailing Address 80 Lyme Road # 250 City Hanover State NH Zip Code 03755 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 17 / 2007 <b>Transaction ID:</b> 2245561 Amount of Each Receipt this Period 30.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Merryl J. Weber Mailing Address 5808 Varna Avenue City Van Nuys State CA Zip Code 91401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer none Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 <b>Transaction ID:</b> 2242135 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Alexandra Marshall Mailing Address 30 W. Cedar Street City Boston State MA Zip Code 02108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Writer Occupation Self/Freelance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 24 / 2007 <b>Transaction ID:</b> 2247593 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 872 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Lark Will Mailing Address 10003 Deercreek Club Rd E City Jacksonville State FL Zip Code 32256 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID:</b> 2243798 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Orozco Mailing Address 910 Lynne Drive City Waukesha State WI Zip Code 53186 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 10 / 2007 <b>Transaction ID:</b> 2243711 Amount of Each Receipt this Period 25.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Mary Kenyon Mailing Address 720 Magnolia Woods Avenue City Baton Rouge State LA Zip Code 70808 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID:</b> 2243784 Amount of Each Receipt this Period 30.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 873 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Rosemary Whiting Mailing Address 14 Brimmer Street City State Zip Code Boston MA 02108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 10 / 2007 <b>Transaction ID:</b> 2243734 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ruth Leventhal Mailing Address 4211 Jonathan Lane City State Zip Code Harrisburg PA 17110 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 30 / 2007 <b>Transaction ID:</b> 2251304 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary A. Delsman Mailing Address 4487 Picacho Drive City State Zip Code Riverside CA 92507 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 <b>Transaction ID:</b> 2242129 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 874 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marsha R. Bingler Mailing Address 533 Briar Cliff Road City State Zip Code Pittsburgh PA 15221 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker/Volunteer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID:</b> 2242150 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Becky Kepraios Mailing Address 2106 N Seminary Avenue, #4 City State Zip Code Chicago IL 60614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 <b>Transaction ID:</b> 2241408 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jane Houck Mailing Address 2351 Nutmeg Terrace City State Zip Code Baltimore MD 21209 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243732 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 875 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Cox Mailing Address 142 W. Calle Manantial Kent City State Zip Code <u>Green Valley</u> <u>AZ</u> <u>85614</u> FEC ID number of contributing federal political committee. <u>C</u> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y <u>05</u> <u>17</u> <u>2007</u> <b>Transaction ID: 2245544</b> Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contrib- utions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Helen O'Mara Mailing Address 5709 8th Avenue City State Zip Code <u>Sacramento</u> <u>CA</u> <u>95820</u> FEC ID number of contributing federal political committee. <u>C</u> Name of Employer Occupation CA Dept. Transport Civil Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y <u>05</u> <u>11</u> <u>2007</u> <b>Transaction ID: 2243787</b> Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contrib- utions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Lucy Cooper Mailing Address 202 Seeley Street Apt. 5A City State Zip Code <u>Brooklyn</u> <u>NY</u> <u>11218</u> FEC ID number of contributing federal political committee. <u>C</u> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y <u>05</u> <u>10</u> <u>2007</u> <b>Transaction ID: 2243702</b> Amount of Each Receipt this Period 10.00 Carol Shea-Porter Contrib- utions <b>[MEMO ITEM]</b> MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 876 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joan D. Glatthorn, Esq. Mailing Address 6331 Camino de la Costa City La Jolla State CA Zip Code 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2242116 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table> Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	3		2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		0	3		2	0	0	7																							
250.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Chella Periyanyagam Mailing Address 200 Lakeside Court City Hanson State KY Zip Code 42413 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243816 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">10.00</td> </tr> </table> Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	7	10.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	1		2	0	0	7																							
10.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Paula Cooper Mailing Address 465 West 23rd Street PH B City New York State NY Zip Code 10011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243722 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table> Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	0		2	0	0	7																							
250.00																																
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																													
0.00																																
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 877 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Caroline R. Arms

Mailing Address 166 Duke Of Gloucester Street

City State Zip Code  
 Annapolis MD 21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Library of Congress

Occupation  
Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247589

Amount of Each Receipt this Period

250.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

B. Full Name (Last, First, Middle Initial)

Dr. Kirstie L. Bellman

Mailing Address 1941 Marview Drive

City State Zip Code  
 Thousand Okas CA 91362

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Aerospace Corp.

Occupation  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243813

Amount of Each Receipt this Period

25.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

C. Full Name (Last, First, Middle Initial)

Mr. Robert Grubbs

Mailing Address 1700 Spruce Street

City State Zip Code  
 S. Pasadena CA 91030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247596

Amount of Each Receipt this Period

100.00

Carol Shea-Porter Contrib-  
utions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 878 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joy Silver Mailing Address 1059 W Skylark Drive City Palatine State IL Zip Code 60067 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Drs. Bedingfield and Rosen Occupation Pediatrician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243699 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Janet Minonne Mailing Address 884 Marlesta Road City Pinole State CA Zip Code 94564 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID:</b> 2245562 Amount of Each Receipt this Period 50.00 Gabby Giffords Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Paul G Chapin Mailing Address 829 Gonzales Road City Santa Fe State NM Zip Code 87501 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID:</b> 2245560 Amount of Each Receipt this Period 100.00 Gabby Giffords Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 879 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Karen L. Shumpert

Mailing Address 171 Ridge Road

City State Zip Code  
 West Milford NJ 07480

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Dialamerica Mntg.

Occupation  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245552

Amount of Each Receipt this Period

100.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)

Mr. Jon Michael Asmundson

Mailing Address 1324 La Pointe Road

City State Zip Code  
 Eureka CA 95503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243725

Amount of Each Receipt this Period

250.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)

Ms. Maureen G Gragg

Mailing Address 714 Calatrava Ave.

City State Zip Code  
 Coral Gables FL 33143

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 7

Transaction ID: 2242225

Amount of Each Receipt this Period

50.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 880 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Michael Litt Mailing Address 92 Wheatherstone PI City State Zip Code Lake Oswego OR 97035 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Oregon Health & Science Prof. Emeritus university Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID:</b> 2244100 Amount of Each Receipt this Period 50.00 Gabby Giffords Contributi- ons <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jane Houck Mailing Address 2351 Nutmeg Terrace City State Zip Code Baltimore MD 21209 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243733 Amount of Each Receipt this Period 100.00 Gabby Giffords Contributi- ons <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Rita Wolz-Sova Mailing Address 2795 Highway 52 City State Zip Code Minooka IL 60447 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243698 Amount of Each Receipt this Period 100.00 Gabby Giffords Contributi- ons <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 881 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Beth Gilbert  
Mailing Address 2929 Stanford Avenue

City State Zip Code  
Dallas TX 75225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242149

Amount of Each Receipt this Period

100.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Stephanie E Lurz  
Mailing Address 909 Cromwell Bridge Rd

City State Zip Code  
Baltimore MD 21286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gay & Lesbian Victory Fund

Occupation  
Manager, Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252031

Amount of Each Receipt this Period

10.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Caroline R. Arms  
Mailing Address 166 Duke Of Gloucester Street

City State Zip Code  
Annapolis MD 21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Library of Congress

Occupation  
Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247590

Amount of Each Receipt this Period

250.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 882 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Marilyn Wolper  
Mailing Address 660 Woodside Drive

City State Zip Code  
Woodside CA 94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243777

Amount of Each Receipt this Period

50.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Roberta S. Lazar  
Mailing Address 219 E. 69th Street, Apt. 8K

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242147

Amount of Each Receipt this Period

50.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Kathleen M. Harrick  
Mailing Address 620 Via Mezner Apt 1102

City State Zip Code  
Naples FL 34108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251300

Amount of Each Receipt this Period

250.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 883 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Alice G. Davis  
Mailing Address 215 W. 14th Street

City State Zip Code  
Wilmington DE 19801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Perinatal Associataion of  
DE.

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245543

Amount of Each Receipt this Period

100.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Mary Brucklacher  
Mailing Address 560 Deer Lake Dr

City State Zip Code  
Findlay OH 45840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247606

Amount of Each Receipt this Period

25.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth Bugbee  
Mailing Address 1455 E McLean Ave

City State Zip Code  
Burton MI 48529

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
General Motors Corp

Occupation  
skilled trades person

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242142

Amount of Each Receipt this Period

50.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 884 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Chella Periyamayagam Mailing Address 200 Lakeside Court City Hanson State KY Zip Code 42413 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID:</b> 2243818 Amount of Each Receipt this Period 25.00 Gabby Giffords Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sandra Bruns Mailing Address 1111 Leavenworth City Omaha State NE Zip Code 68102 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Graphic Artist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 30 / 2007 <b>Transaction ID:</b> 2251295 Amount of Each Receipt this Period 50.00 Gabby Giffords Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Cox Mailing Address 142 W. Calle Manantial Kent City Green Valley State AZ Zip Code 85614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 17 / 2007 <b>Transaction ID:</b> 2245545 Amount of Each Receipt this Period 50.00 Gabby Giffords Contributions <b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 885 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert Grubbs Mailing Address 1700 Spruce Street City State Zip Code S. Pasadena CA 91030 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID: 2247595</b> Amount of Each Receipt this Period 100.00 Gabby Giffords Contributions <b>[MEMO ITEM]</b> MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Lucy Cooper Mailing Address 202 Seeley Street Apt. 5A City State Zip Code Brooklyn NY 11218 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 2243703</b> Amount of Each Receipt this Period 10.00 Gabby Giffords Contributions <b>[MEMO ITEM]</b> MEMO
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Kirstie L. Bellman Mailing Address 1941 Marview Drive City State Zip Code Thousand Okas CA 91362 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243814</b> Amount of Each Receipt this Period 25.00 Gabby Giffords Contributions <b>[MEMO ITEM]</b> MEMO
Name of Employer Occupation The Aerospace Corp. Scientist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Helen O'Mara

Mailing Address 5709 8th Avenue

City State Zip Code  
 Sacramento CA 95820

FEC ID number of contributing federal political committee.

C

Name of Employer  
CA Dept. TransportOccupation  
Civil Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243789

Amount of Each Receipt this Period

50.00

Gabby Giffords Contributions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joy Silver

Mailing Address 1059 W Skylark Drive

City State Zip Code  
 Palatine IL 60067

FEC ID number of contributing federal political committee.

C

Name of Employer  
Drs. Bedingfield and RosenOccupation  
Pediatrician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243700

Amount of Each Receipt this Period

100.00

Gabby Giffords Contributions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Dr. Mary Lou Courge

Mailing Address 1905 Princess Street

City State Zip Code  
 Wilmington NC 28405

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243713

Amount of Each Receipt this Period

250.00

Gabby Giffords Contributions

**[MEMO ITEM]**  
MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Barbara P. Ruskin  
Mailing Address 140 Spring Street

City State Zip Code  
Watertown MA 02472

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
unemployed--and I'm not  
contributing m

Occupation  
group worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243779

Amount of Each Receipt this Period

50.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joan D. Glatthorn, Esq.  
Mailing Address 6331 Camino de la Costa

City State Zip Code  
La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242115

Amount of Each Receipt this Period

250.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Marilyn C. Pizer  
Mailing Address 115 Stateside Drive

City State Zip Code  
Chapel Hill NC 27514

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Binkley Preschool

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245550

Amount of Each Receipt this Period

100.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Becky Kepraios Mailing Address 2106 N Seminary Avenue, #4 City Chicago State IL Zip Code 60614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 02 / 2007 <b>Transaction ID:</b> 2241409 Amount of Each Receipt this Period 50.00 Gabby Giffords Contributi- ons <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Merryl J. Weber Mailing Address 5808 Varna Avenue City Van Nuys State CA Zip Code 91401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer none Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 <b>Transaction ID:</b> 2242136 Amount of Each Receipt this Period 100.00 Gabby Giffords Contributi- ons <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Mary Little Mailing Address PO Box 991 City Glen Ellen State CA Zip Code 95442 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 24 / 2007 <b>Transaction ID:</b> 2247601 Amount of Each Receipt this Period 50.00 Gabby Giffords Contributi- ons <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Paula Cooper		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 465 West 23rd Street PH B		<b>Transaction ID:</b> 2243720
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation REQUESTED	<b>[MEMO ITEM]</b> MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marsha R. Bingler		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7
Mailing Address 533 Briar Cliff Road		<b>Transaction ID:</b> 2242151
City State Zip Code Pittsburgh PA 15221	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Homemaker/Volunteer	<b>[MEMO ITEM]</b> MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Tammy D. McLeod		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 5428 E. Sanna Street		<b>Transaction ID:</b> 2243714
City State Zip Code Paradise Valley AZ 85253	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Arizona Public Service Manager	<b>[MEMO ITEM]</b> MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Lark Will		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 10003 Deercreek Club Rd E		<b>Transaction ID:</b> 2243800
City Jacksonville	State FL	Zip Code 32256
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer  	Occupation REQUESTED	Gabby Giffords Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> MEMO

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Rosemary Rowan		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 666 Upas Street Unit 404		<b>Transaction ID:</b> 2243741
City San Diego	State CA	Zip Code 92103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Belt Collins Hawaii	Occupation Urban Planner	Gabby Giffords Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> MEMO

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Beverly D. Johnson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 683 N. Kalaheo		<b>Transaction ID:</b> 2243492
City Kailua	State HI	Zip Code 96734
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer  	Occupation Retired	Gabby Giffords Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Olivia A. Tartakow

Mailing Address 18 Elgin Lane

City State Zip Code  
Palm Beach Gardens FL 33418

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Jewish Family & Children's

Occupation  
Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243746

Amount of Each Receipt this Period

100.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**

MEMO

**B.** Full Name (Last, First, Middle Initial)

Dr. Carol L. Lassen

Mailing Address 80 Locust Street

City State Zip Code  
Denver CO 80220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242124

Amount of Each Receipt this Period

50.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**

MEMO

**C.** Full Name (Last, First, Middle Initial)

Ms. Ruth R. Hailperin

Mailing Address 175 W. North Street, Apt. 234C

City State Zip Code  
Nazaret PA 18064

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245555

Amount of Each Receipt this Period

100.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Judith Ann Tickner  
Mailing Address 1746 Sunset Avenue

City State Zip Code  
Santa Monica CA 90405

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
University of Southern California

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 10 / 2007

Transaction ID: 2243727

Amount of Each Receipt this Period

250.00

Gabby Giffords Contributions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Muriel T. Asbornsen

Mailing Address PO Box 26  
 Sheepfold Farm

City State Zip Code  
Stuyvesant NY 12173

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 10 / 2007

Transaction ID: 2243719

Amount of Each Receipt this Period

200.00

Gabby Giffords Contributions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jacqueline E Boynton

Mailing Address 3945 N. Harcourt Place

City State Zip Code  
Milwaukee WI 53211

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Law Office of Jacqueline Boynton

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 03 / 2007

Transaction ID: 2242140

Amount of Each Receipt this Period

100.00

Gabby Giffords Contributions

**[MEMO ITEM]**  
MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 893 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Mrs. Mary Kenyon

Mailing Address 720 Magnolia Woods Avenue

City State Zip Code  
 Baton Rouge LA 70808

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243786

Amount of Each Receipt this Period

30.00

Gabby Giffords Contributi-  
ons

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**B.** Ms. Molly K. O'Rourke

Mailing Address 1724 Connecticut Ave NW

City State Zip Code  
 Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Peter D. Hart Research,  
Inc.

Occupation  
Public Opinion Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251278

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Tamara M Collins

Mailing Address 3666 W Scribner Lane

City State Zip Code  
 Inglewood CA 90305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
First Federal Bank of CA

Occupation  
Operations Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245109

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 894 / 963

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Karen L. Shumpert

Mailing Address 171 Ridge Road

City State Zip Code  
 West Milford NJ 07480

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Dialamerica Mntg.

Occupation  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245551

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)

Mrs. Norma K Stone

Mailing Address 3601 Turtle Creek Blvd. #404

City State Zip Code  
 Dallas TX 75219

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247200

Amount of Each Receipt this Period

250.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)

Ms. Judith Thompson

Mailing Address 3427 Black Willow Trail

City State Zip Code  
 DeLand FL 32724

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246476

Amount of Each Receipt this Period

2300.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 895 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Miss Jean Miller Mailing Address PO Box 349 City State Zip Code Arlington VT 05250 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243811 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table> Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	7	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	1		2	0	0	7																							
100.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Mary J Mycek Mailing Address 34 Laurel Ave. City State Zip Code Derby CT 06418 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243809 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table> Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	7	25.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	1		2	0	0	7																							
25.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Shannon M OConnell Mailing Address 3303 McFarland Road City State Zip Code Tampa FL 33618 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation self-employed consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2245979 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table> Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	0	7	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	9		2	0	0	7																							
100.00																																
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																													
0.00																																
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 896 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Michelle Minero  
Mailing Address 320 Western Avenue

City State Zip Code  
Petaluma CA 94952

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MFT

Occupation  
Eating Disorders Rev. Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243737

Amount of Each Receipt this Period

25.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Stephanie E Lurz  
Mailing Address 909 Cromwell Bridge Rd

City State Zip Code  
Baltimore MD 21286

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Gay & Lesbian Victory Fund

Occupation  
Manager, Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252032

Amount of Each Receipt this Period

10.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ellen Widoff  
Mailing Address 1108 Oak Knoll Terrace

City State Zip Code  
Rockville MD 20850

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252037

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 897 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Mr. Adam Goers

Mailing Address 1700 Q Street

City State Zip Code  
 Washington DC 20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fundraiser

Occupation  
Hillary for President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246428

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

B. Full Name (Last, First, Middle Initial)

Ms. Amie I. Kershner

Mailing Address 3114 E. Baltimore St.

City State Zip Code  
 Baltimore MD 21224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Emily's List

Occupation  
Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2245135

Amount of Each Receipt this Period

200.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

C. Full Name (Last, First, Middle Initial)

Ms. Heather L Colburn

Mailing Address 1320 Rutledge St

City State Zip Code  
 Madison WI 53703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251356

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 898 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jared W Davis  
Mailing Address 103 S. Spruce St.

City State Zip Code  
Hammond LA 70403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Friedman Billings Ramsey

Occupation  
student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247197

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Anice Schervish  
Mailing Address 1314 Irving St., NW  
garden

City State Zip Code  
Washington DC 20010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HUD

Occupation  
program manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251282

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Amy Yates  
Mailing Address 88 Greenwich St. #425

City State Zip Code  
New York NY 10006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Highbridge Capital

Occupation  
Director of Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246435

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 899 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Karli S Penders		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 850 North Randolph Street 1712		<b>Transaction ID:</b> 2247215
City Arlington	State VA	Zip Code 22203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer N/A	Occupation Student	Hillary Clinton Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Michael P Griffith		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address 308 N Edgewood		<b>Transaction ID:</b> 2252029
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Association for Financial Professional	Occupation Public Policy Administrator	Hillary Clinton Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Beth Gilbert		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7
Mailing Address 2929 Stanford Avenue		<b>Transaction ID:</b> 2242148
City Dallas	State TX	Zip Code 75225
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation REQUESTED	Hillary Clinton Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 900 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Karin Johanson

Mailing Address 3100 Connecticut Avenue #345

City State Zip Code  
 Washington DC 20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Dewey Square Group

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247201

Amount of Each Receipt this Period

1000.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**B.** Ms. Sadie Fechter Dingfelder

Mailing Address 1660 Lanier # 317

City State Zip Code  
 Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
APA

Occupation  
Editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251306

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Roslyn W Halpern

Mailing Address 7546 SW Aloma Way  
 #1

City State Zip Code  
 Portland OR 97223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self

Occupation  
ecommerce

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 7

Transaction ID: 2242229

Amount of Each Receipt this Period

50.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 901 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Penelope A. Taylor  
Mailing Address 1643 Seascap Blvd.

City State Zip Code  
Aptos CA 95003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242122

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Halcyon Kim Mathis  
Mailing Address 3141 Martha Custis Dr

City State Zip Code  
Alexandria VA 22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMILY's List

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251308

Amount of Each Receipt this Period

50.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Dr. Kimberley Salter  
Mailing Address 31462 Flying Cloud Drive

City State Zip Code  
Laguna Niguel CA 92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consulting Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243708

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 902 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sheila Claire O'Connell  
Mailing Address 9408 Thornhill Road

City State Zip Code  
Silver Spring MD 20901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247607

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Rosemarie W. Day  
Mailing Address 33 Grant Street

City State Zip Code  
Somerville MA 02145

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
State of MA

Occupation  
Budget Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251297

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Gloria Deison  
Mailing Address 1311 Peacefield Place

City State Zip Code  
Tallahassee FL 32308

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242130

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 903 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert Grubbs  
Mailing Address 1700 Spruce Street

City State Zip Code  
S. Pasadena CA 91030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247594

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Dr. Sarah J. Kilpatrick  
Mailing Address 1101 S State St Apt

City State Zip Code  
Chicago IL 60605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Illinois

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243709

Amount of Each Receipt this Period

500.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ashlee Tran  
Mailing Address 909 North Carolina SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMILY's List

Occupation  
web intern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 2246501

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 904 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Diane W McMahon  
Mailing Address 2735 North 11th Street

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SOCMA

Occupation  
Association Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251460

Amount of Each Receipt this Period

80.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Dr. Ellen Russell Dunbar  
Mailing Address 917 Princeton Ave

City State Zip Code  
Modesto CA 95350

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243704

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Dr. Holly A. Williams  
Mailing Address 2494 Brookdale Drive NE

City State Zip Code  
Atlanta GA 30345

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242141

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 905 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Lee A Zahnow

Mailing Address 3732 Windom Place NW

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
World Wildlife Fund

Occupation  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243752

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**B.** Ms. Jennifer J Peters

Mailing Address 3895 Rodman Street, NW  
 # A-73

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ICF International

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2247611

Amount of Each Receipt this Period

40.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Jennifer J Peters

Mailing Address 3895 Rodman Street, NW  
 # A-73

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ICF International

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2247610

Amount of Each Receipt this Period

60.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 906 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Erin M Stuckey

Mailing Address 2450 Ontario Rd NW

City State Zip Code  
 Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Population Services Inter-  
national

Occupation  
International Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 2247198

Amount of Each Receipt this Period

20.00

Hillary Clinton Contrib-  
utions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**B.** Ms. Diane T Feldman

Mailing Address 1608 Webster Street NW

City State Zip Code  
 Washington DC 20011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Feldman Group, Inc.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251285

Amount of Each Receipt this Period

200.00

Hillary Clinton Contrib-  
utions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Martha E McKenna

Mailing Address 913 S Decker Avenue

City State Zip Code  
 Baltimore MD 21224

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sheila Dixon for Mayor

Occupation  
Campaign Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 0 / 2 0 0 7

Transaction ID: 2245987

Amount of Each Receipt this Period

100.00

Hillary Clinton Contrib-  
utions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 907 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Julia D. Harper

Mailing Address 156 Cedar Ave.

City State Zip Code  
 Arlington MA 02476

FEC ID number of contributing federal political committee.

C

Name of Employer  
Sun MicrosystemsOccupation  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242125

Amount of Each Receipt this Period

100.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Allison Mitchell

Mailing Address 2420 16th Street, NW # 606

City State Zip Code  
 Washington DC 20009

FEC ID number of contributing federal political committee.

C

Name of Employer  
Women WorkOccupation  
Development Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245956

Amount of Each Receipt this Period

20.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Britt A Cocanour

Mailing Address 6606 Allegheny Ave

City State Zip Code  
 Takoma Park MD 20912

FEC ID number of contributing federal political committee.

C

Name of Employer  
EMILY's ListOccupation  
Chief of Staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245964

Amount of Each Receipt this Period

20.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 908 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lucy Melcher Mailing Address 2401 Calvert Street NW #925 City Washington State DC Zip Code 20008 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer student Occupation Duke University Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> 2251324 Amount of Each Receipt this Period 20.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn Wolper Mailing Address 660 Woodside Drive City Woodside State CA Zip Code 94062 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID:</b> 2243774 Amount of Each Receipt this Period 100.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Caroline C Fines Mailing Address 10621 Regent Park Court City Fairfax State VA Zip Code 22030 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer EMILY's List Occupation Dir of Finance and Compliance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> 2252027 Amount of Each Receipt this Period 20.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 909 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Joan Hohlt Wich  
Mailing Address 3122 Ferndale Street

City State Zip Code  
Houston TX 77098

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251287

Amount of Each Receipt this Period

4600.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Ellen L Moran  
Mailing Address 3106 Cummings Lane

City State Zip Code  
Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EMILY's List

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 2246005

Amount of Each Receipt this Period

200.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Roberta S. Lazar  
Mailing Address 219 E. 69th Street, Apt. 8K

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242145

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 910 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Carolyn Hansen Mailing Address 1551 Valencia Road City State Zip Code Schenectady NY 12309 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 10 / 2007 <b>Transaction ID: 2243743</b> Amount of Each Receipt this Period 50.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joyce Benjamins Mailing Address 1310 S. Oxford Road City State Zip Code Grosse Pointe MI 48236 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Wayne State U Neurochemist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 10 / 2007 <b>Transaction ID: 2243706</b> Amount of Each Receipt this Period 25.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Suzanne Davis Mailing Address 6300 Sharon Hills Road City State Zip Code Charlotte NC 28210 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID: 2243795</b> Amount of Each Receipt this Period 50.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 911 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Lorraine Barnhart

Mailing Address P.O. Box 382

City State Zip Code  
 Great Falls VA 22066

FEC ID number of contributing federal political committee.

C

Name of Employer  
Huber FoundationOccupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245548

Amount of Each Receipt this Period

100.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

B. Full Name (Last, First, Middle Initial)

Mrs. Marion I. Covell

Mailing Address P.O. Box 165

City State Zip Code  
 Babylon NY 11702

FEC ID number of contributing federal political committee.

C

Name of Employer  
self employedOccupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243731

Amount of Each Receipt this Period

100.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

C. Full Name (Last, First, Middle Initial)

Ms. Rebecca Webber

Mailing Address 216 12th Street SE #B

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing federal political committee.

C

Name of Employer  
USGOccupation  
foreign affairs officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252035

Amount of Each Receipt this Period

20.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 912 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Rebecca Webber  
Mailing Address 216 12th Street SE #B

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee.

C

Name of Employer  
USGOccupation  
foreign affairs officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252036

Amount of Each Receipt this Period

5.00

Hillary Clinton Contributions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Mr. William J. Robinson  
Mailing Address 1506 30th Street NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee.

C

Name of Employer  
MCSROccupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251280

Amount of Each Receipt this Period

1000.00

Hillary Clinton Contributions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Steph Ridder  
Mailing Address 1490 North Poes Rd.

City State Zip Code  
Flint Hill VA 22627

FEC ID number of contributing federal political committee.

C

Name of Employer  
George Washington Univ.Occupation  
law professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247227

Amount of Each Receipt this Period

920.00

Hillary Clinton Contributions

**[MEMO ITEM]**  
MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 913 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Nick S. Goldberg Mailing Address 1300 Army Navy Drive # 1019 City State Zip Code Arlington VA 22202 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer First Focus Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> 2252028 Amount of Each Receipt this Period 20.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Harlan Larson Mailing Address 10605 297th Avenue City State Zip Code Princeton MN 55371 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID:</b> 2242133 Amount of Each Receipt this Period 100.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Susan Namm Spencer Mailing Address Jupiter Yacht Club, Apt 502 700 South US Highway One City State Zip Code Jupiter FL 33477 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> 2251286 Amount of Each Receipt this Period 1000.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 914 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Ms. Steph Ridder

Mailing Address 1490 North Poes Rd.

City State Zip Code  
 Flint Hill VA 22627

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
George Washington Univ.

Occupation  
law professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247226

Amount of Each Receipt this Period

80.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**B.** Full Name (Last, First, Middle Initial)

Ms. Greta Houston

Mailing Address 5560 Germantown Road

City State Zip Code  
 Midland VA 22728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cadwalader, Wickersham &  
Taft LLP

Occupation  
Legal Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251277

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**C.** Full Name (Last, First, Middle Initial)

Ms. Maren Hesla

Mailing Address 5515 Little Falls Road

City State Zip Code  
 Arlington VA 22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMILY's List

Occupation  
manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2246004

Amount of Each Receipt this Period

80.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 915 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Jane Volk  
Mailing Address 541 E Nelson Ave

City State Zip Code  
Alexandria VA 22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMILY's List

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251341

Amount of Each Receipt this Period

160.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Mary Jane Volk  
Mailing Address 541 E Nelson Ave

City State Zip Code  
Alexandria VA 22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMILY's List

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251340

Amount of Each Receipt this Period

40.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Chella Perianayagam  
Mailing Address 200 Lakeside Court

City State Zip Code  
Hanson KY 42413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243815

Amount of Each Receipt this Period

35.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 916 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Miss. Katherine E Goktepe

Mailing Address 1439 McLean Mews Ct

City State Zip Code  
 McLean VA 22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lynn Woolsey

Occupation  
legislative aide

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251320

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**B.** Ms. Enid Gottesman

Mailing Address 530 Ocean Blvd.

City State Zip Code  
 Golden Beach FL 33160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247598

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Rebecca Bahar-Cook

Mailing Address 525 Westmoreland

City State Zip Code  
 Lansing MI 48915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251275

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 917 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Kathleen S Brueger

Mailing Address 5217 Yorktown Blvd

City State Zip Code  
 Arlington VA 22207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
FDIC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 8 / 2 0 0 7

Transaction ID: 2251372

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**B.** Ms. Gertrude K. Meyers

Mailing Address 1240 Colonial Drive

City State Zip Code  
 Baton Rouge LA 70806

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247591

Amount of Each Receipt this Period

30.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Janet Blaustein

Mailing Address 337 Cambridge Drive

City State Zip Code  
 Ramsey NJ 07446

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242143

Amount of Each Receipt this Period

50.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 918 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Kathleen S Brueger

Mailing Address 5217 Yorktown Blvd

City State Zip Code  
Arlington VA 22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FDIC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 0 7

Transaction ID: 2247634

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)

Ms. Diana Strassmann

Mailing Address 5211 Briar Drive

City State Zip Code  
Houston TX 77056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rice University

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251348

Amount of Each Receipt this Period

2300.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)

Ms. Maryann Cuddeback

Mailing Address 4934 E. Timrod St.

City State Zip Code  
Tucson AZ 85711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2247639

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 919 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Dr. Cheryl Wojciechowski

Mailing Address 4817 36th Street NW # 511

City State Zip Code  
 Washington DC 20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
USAID

Occupation  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252038

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

**B.** Ms. Susan Markham

Mailing Address 1402 emerson street nw

City State Zip Code  
 Washington DC 20011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Emily's List

Occupation  
Deputy Political Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245966

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Tiffany L Brown

Mailing Address 4544 Pimlico Place

City State Zip Code  
 Okemos MI 48864

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Granholm Leadership Fund

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251328

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 920 / 963

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Sylvia B Olivetti  
Mailing Address 1917 Locust Grove Road

City State Zip Code  
Silver Spring MD 20910

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Arent Fox

Occupation  
Legal Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247220

Amount of Each Receipt this Period

30.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Constance C. Hickey  
Mailing Address 11905 Jubal Early Court

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2247621

Amount of Each Receipt this Period

40.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jennifer M. Brown  
Mailing Address 4530 Broad Branch Rd NW

City State Zip Code  
Washington DC 20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Planned Parenthood Federa-  
tion of Ameri

Occupation  
Field Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 2245974

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 921 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jennifer M. Brown			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 4530 Broad Branch Rd NW			<b>Transaction ID:</b> 2245973	
City State Zip Code Washington DC 20008			Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			Hillary Clinton Contributions	
Name of Employer Planned Parenthood Federation of America			<b>[MEMO ITEM]</b> MEMO	
Occupation Field Manager				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ 0.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sylvia B Olivetti			Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 1917 Locust Grove Road			<b>Transaction ID:</b> 2247219	
City State Zip Code Silver Spring MD 20910			Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			Hillary Clinton Contributions	
Name of Employer Arent Fox			<b>[MEMO ITEM]</b> MEMO	
Occupation Legal Secretary				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ 0.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Louise Sause			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 450 Burgundy Sq Apt 201			<b>Transaction ID:</b> 2243793	
City State Zip Code East Lansing MI 48823			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			Hillary Clinton Contributions	
Name of Employer Retired			<b>[MEMO ITEM]</b> MEMO	
Occupation Retired				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 922 / 963

(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)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary A. Delsman

Mailing Address 4487 Picacho Drive

City State Zip Code  
 Riverside CA 92507

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242128

Amount of Each Receipt this Period

50.00

Hillary Clinton Contributions

**[MEMO ITEM]**  
 MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Anita B. Dunn

Mailing Address 4413 Stanford St.

City State Zip Code  
 Chevy Chase MD 20815

FEC ID number of contributing federal political committee.

C

Name of Employer  
Squier Knapp DunnOccupation  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245971

Amount of Each Receipt this Period

199.00

Hillary Clinton Contributions

**[MEMO ITEM]**  
 MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Karen J Moore

Mailing Address 601 Eagles Wing Ct.

City State Zip Code  
 Linthicum Heights MD 21090

FEC ID number of contributing federal political committee.

C

Name of Employer  
Sinai HospitalOccupation  
Certified Coding Spec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2247643

Amount of Each Receipt this Period

25.00

Hillary Clinton Contributions

**[MEMO ITEM]**  
 MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 923 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Karen J Moore

Mailing Address 601 Eagles Wing Ct.

City State Zip Code  
 Linthicum Heights MD 21090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sinai Hospital

Occupation  
Certified Coding Spec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 2247642

Amount of Each Receipt this Period

40.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

B. Full Name (Last, First, Middle Initial)

Ms. Roberta R Lake

Mailing Address 605 E Street, SE  
Basement

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASALH

Occupation  
Assistant to the ED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 2251331

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

C. Full Name (Last, First, Middle Initial)

Ms. Eileen Harrington

Mailing Address 616 E Street, NW # 212

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Federal Trade Commission

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 6 / 2 0 0 7

Transaction ID: 2247635

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 924 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lorraine C. McCrary Mailing Address 4411 Ripley City Davenport State IA Zip Code 52806 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt MM / DD / YYYY 05 / 31 / 2007 <b>Transaction ID:</b> 2252041 Amount of Each Receipt this Period 100.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Kathleen M. Harrick Mailing Address 620 Via Mezner Apt 1102 City Naples State FL Zip Code 34108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt MM / DD / YYYY 05 / 30 / 2007 <b>Transaction ID:</b> 2251299 Amount of Each Receipt this Period 500.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Eva Landy Mailing Address 1 Nayatt Rd City Barrington State RI Zip Code 02806 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Info. Processor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt MM / DD / YYYY 05 / 17 / 2007 <b>Transaction ID:</b> 2245558 Amount of Each Receipt this Period 200.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 925 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Maethel Shindelman Mailing Address PO Box 370 City Franklin State NC Zip Code 28744 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 2245546</b> Amount of Each Receipt this Period 50.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lisa Robillard Mailing Address 4326 South 36th Street City Arlington State VA Zip Code 22206 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Sr. Program Assistant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID: 2246514</b> Amount of Each Receipt this Period 20.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ellen M. Kemp Mailing Address 184 Clover Lane City Princeton State NJ Zip Code 08540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Systems Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 2243768</b> Amount of Each Receipt this Period 100.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 926 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Joan D. Glatthorn, Esq. Mailing Address 6331 Camino de la Costa City La Jolla State CA Zip Code 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242114</b> Amount of Each Receipt this Period 1000.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Craig L Auster Mailing Address 65 Highview Drive City Carmel State NY Zip Code 10512 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Student Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 0 / 2 0 0 7 <b>Transaction ID: 2245998</b> Amount of Each Receipt this Period 60.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Edna K. Morris Mailing Address 14 North Pine Circle City Belleair State FL Zip Code 33756 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Blue Coral Seafood & Spirits Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 0 / 2 0 0 7 <b>Transaction ID: 2245982</b> Amount of Each Receipt this Period 2300.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 927 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

A. Ms. Margaret T. Henney

Mailing Address 4212 Queensbury Road

City State Zip Code  
 Hyattsville MD 20781

FEC ID number of contributing federal political committee.

C

Name of Employer  
walker/seal co's inc.Occupation  
electrician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 8 / 2 0 0 7

Transaction ID: 2247617

Amount of Each Receipt this Period

20.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

Full Name (Last, First, Middle Initial)

B. Ms. Margaret T. Henney

Mailing Address 4212 Queensbury Road

City State Zip Code  
 Hyattsville MD 20781

FEC ID number of contributing federal political committee.

C

Name of Employer  
walker/seal co's inc.Occupation  
electrician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 6 / 2 0 0 7

Transaction ID: 2247616

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

Full Name (Last, First, Middle Initial)

C. Miss. Stacie L. Temple

Mailing Address 182 Martin Lane

City State Zip Code  
 Alexandria VA 22304

FEC ID number of contributing federal political committee.

C

Name of Employer  
Wal-Mart WatchOccupation  
Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

Transaction ID: 2246488

Amount of Each Receipt this Period

40.00

Hillary Clinton Contribut-  
ions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 928 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Ms. Margaret T. Henney

Mailing Address 4212 Queensbury Road

City State Zip Code  
 Hyattsville MD 20781

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
walker/seal co's inc.

Occupation  
electrician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 6 / 2 0 0 7

Transaction ID: 2247615

Amount of Each Receipt this Period

40.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**B.** Ms. Britt A Cocanour

Mailing Address 6606 Allegheny Ave

City State Zip Code  
 Takoma Park MD 20912

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EMILY's List

Occupation  
Chief of Staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245965

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

Full Name (Last, First, Middle Initial)

**C.** Ms. Ruth Leventhal

Mailing Address 4211 Jonathan Lane

City State Zip Code  
 Harrisburg PA 17110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 0 / 2 0 0 7

Transaction ID: 2251303

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**

MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 929 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Rosemary Reed  
Mailing Address 1815 18th Street NW # 500

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Double R Productions

Occupation  
TV Producer/Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 2251067

Amount of Each Receipt this Period

40.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Tiffany N Reed  
Mailing Address 2450 Ontario Rd NW

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EMILY's List

Occupation  
Production Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252047

Amount of Each Receipt this Period

60.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rosemary Rowan  
Mailing Address 666 Upas Street Unit 404

City State Zip Code  
San Diego CA 92103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Belt Collins Hawaii

Occupation  
Urban Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243739

Amount of Each Receipt this Period

100.00

Hillary Clinton Contribut-  
ions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 930 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Cheryl Townsend			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 674 Cervantes Drive			<b>Transaction ID:</b> 2247216	
City State Zip Code Henderson NV 89014		Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions		
Name of Employer Occupation Clark County Administration		<b>[MEMO ITEM]</b> MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ruth Leventhal			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 4211 Jonathan Lane			<b>Transaction ID:</b> 2243826	
City State Zip Code Harrisburg PA 17110		Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions		
Name of Employer Occupation REQUESTED		<b>[MEMO ITEM]</b> MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Olivia A. Tartakow			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 18 Elgin Lane			<b>Transaction ID:</b> 2243745	
City State Zip Code Palm Beach Gardens FL 33418		Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions		
Name of Employer Occupation Jewish Family & Children's Counselor		<b>[MEMO ITEM]</b> MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			0.00	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 931 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Beverly D. Johnson

Mailing Address 683 N. Kalaheo

City State Zip Code  
 Kailua HI 96734

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: 2243491

Amount of Each Receipt this Period

100.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Bess Freedlander

Mailing Address 14 Glen Avenue

City State Zip Code  
 Annapolis MD 21401

FEC ID number of contributing federal political committee.

C

Name of Employer  
Community FoundationOccupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247214

Amount of Each Receipt this Period

60.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

**C.** Full Name (Last, First, Middle Initial)  
Lark Will

Mailing Address 10003 Deercreek Club Rd E

City State Zip Code  
 Jacksonville FL 32256

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243797

Amount of Each Receipt this Period

50.00

Hillary Clinton Contributions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 932 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Laura M Fruge		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 420 Oklahoma Avenue, NE #102		<b>Transaction ID:</b> 2251364	
City Washington	State DC	Zip Code 20002	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions	
Name of Employer EMILY's List	Occupation Finance Tracker	<b>[MEMO ITEM]</b> MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Laura M Fruge		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 420 Oklahoma Avenue, NE #102		<b>Transaction ID:</b> 2251363	
City Washington	State DC	Zip Code 20002	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions	
Name of Employer EMILY's List	Occupation Finance Tracker	<b>[MEMO ITEM]</b> MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Beth J Davidson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 407 N. Midland Ave		<b>Transaction ID:</b> 2246461	
City Nyack	State NY	Zip Code 10960	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions	
Name of Employer JK/Generation	Occupation consultant	<b>[MEMO ITEM]</b> MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 933 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Ms. Stephanie Covington

Mailing Address 407 7th Street

City State Zip Code  
 Del Mar CA 92014

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247599

Amount of Each Receipt this Period

250.00

Hillary Clinton Contributions

[MEMO ITEM]  
MEMO

B. Full Name (Last, First, Middle Initial)

Ms. Tanya M Bjork

Mailing Address 2805 Dewey Court

City State Zip Code  
 Middleton WI 53562

FEC ID number of contributing federal political committee.

C

Name of Employer  
Emily's ListOccupation  
POP Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 2246003

Amount of Each Receipt this Period

100.00

Hillary Clinton Contributions

[MEMO ITEM]  
MEMO

C. Full Name (Last, First, Middle Initial)

Mrs. Mary Kenyon

Mailing Address 720 Magnolia Woods Avenue

City State Zip Code  
 Baton Rouge LA 70808

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243782

Amount of Each Receipt this Period

50.00

Hillary Clinton Contributions

[MEMO ITEM]  
MEMO

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 934 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Judith A. Maynes Mailing Address 13621 Dearing Bay Drive #1001 City State Zip Code Carol Gables FL 33158 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243730 Amount of Each Receipt this Period 500.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Eillen R. Malcolm Mailing Address 1120 Connecticut Ave., N.W. Suite 1100 City State Zip Code Washington DC 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7 <b>Transaction ID:</b> 2247199 Amount of Each Receipt this Period 200.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Margaret Fenley Mailing Address 105 Cartwright Drive City State Zip Code Springfield IL 62704 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State Of Illinois Occupation Supv. Soc. Worker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243705 Amount of Each Receipt this Period 100.00 Hillary Clinton Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 935 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Leila Marquis Mailing Address 13555 Coliseum Drive, Apt. B City Chesterfield State MO Zip Code 63017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID:</b> 2242119 Amount of Each Receipt this Period 25.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Ellen C. Eagan Mailing Address 344 Santa Paula Avenue City Millbrae State CA Zip Code 94030 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Blood Bank Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID:</b> 2242152 Amount of Each Receipt this Period 200.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Robert Grubbs Mailing Address 1700 Spruce Street City S. Pasadena State CA Zip Code 91030 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 <b>Transaction ID:</b> 2247597 Amount of Each Receipt this Period 100.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 936 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jon Michael Asmundson Mailing Address 1324 La Pointe Road City State Zip Code Eureka CA 95503 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243726 Amount of Each Receipt this Period 250.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Muriel T. Asbornsen Mailing Address PO Box 26 Sheepfold Farm City State Zip Code Stuyvesant NY 12173 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> 2243717 Amount of Each Receipt this Period 200.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Michael Litt Mailing Address 92 Wheatherstone PI City State Zip Code Lake Oswego OR 97035 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Oregon Health & Science university Prof. Emeritus Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID:</b> 2244098 Amount of Each Receipt this Period 50.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 937 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth Orozco

Mailing Address 910 Lynne Drive

City State Zip Code  
Waukesha WI 53186

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WCSS

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243710

Amount of Each Receipt this Period

25.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)

Ms. Stephanie E Lurz

Mailing Address 909 Cromwell Bridge Rd

City State Zip Code  
Baltimore MD 21286

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Gay & Lesbian Victory Fund

Occupation  
Manager, Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 2252030

Amount of Each Receipt this Period

10.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)

Mrs. Mary Kenyon

Mailing Address 720 Magnolia Woods Avenue

City State Zip Code  
Baton Rouge LA 70808

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243785

Amount of Each Receipt this Period

30.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 938 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Maureen G Gragg  
Mailing Address 714 Calatrava Ave.

City State Zip Code  
Coral Gables FL 33143

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 5 / 2 0 0 7

Transaction ID: 2242223

Amount of Each Receipt this Period

50.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Beverly D. Johnson  
Mailing Address 683 N. Kalaheo

City State Zip Code  
Kailua HI 96734

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: 2240856

Amount of Each Receipt this Period

100.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Rosemary Rowan  
Mailing Address 666 Upas Street Unit 404

City State Zip Code  
San Diego CA 92103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Belt Collins Hawaii

Occupation  
Urban Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243742

Amount of Each Receipt this Period

50.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 939 / 963

(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)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Marilyn Wolper Mailing Address 660 Woodside Drive City Woodside State CA Zip Code 94062 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243776 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table> Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	7	50.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	1		2	0	0	7																							
50.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Carolyn Hansen Mailing Address 1551 Valencia Road City Schenectady State NY Zip Code 12309 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243744 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table> Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	50.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	0		2	0	0	7																							
50.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Joyce Benjamins Mailing Address 1310 S. Oxford Road City Grosse Pointe State MI Zip Code 48236 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wayne State U Occupation Neurochemist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2243707 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table> Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	25.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	0		2	0	0	7																							
25.00																																
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																													
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<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 940 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Carol Z Barnett Mailing Address 10245 Collins Avenue # 12E City State Zip Code Bal Harbour FL 33154 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242120</b> Amount of Each Receipt this Period 5.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Joan D. Glatthorn, Esq. Mailing Address 6331 Camino de la Costa City State Zip Code La Jolla CA 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242117</b> Amount of Each Receipt this Period 250.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Roberta S. Lazar Mailing Address 219 E. 69th Street, Apt. 8K City State Zip Code New York NY 10021 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7 <b>Transaction ID: 2242146</b> Amount of Each Receipt this Period 50.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 941 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Alice G. Davis  
Mailing Address 215 W. 14th Street

City State Zip Code  
Wilmington DE 19801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Perinatal Associataion of  
DE.

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245542

Amount of Each Receipt this Period

100.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Ms. Helen O'Mara  
Mailing Address 5709 8th Avenue

City State Zip Code  
Sacramento CA 95820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA Dept. Transport

Occupation  
Civil Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243788

Amount of Each Receipt this Period

50.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Gertrude K. Meyers  
Mailing Address 1240 Colonial Drive

City State Zip Code  
Baton Rouge LA 70806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247592

Amount of Each Receipt this Period

30.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 942 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary V Hughes

Mailing Address 201 Harrison  
#608

City State Zip Code  
San Francisco CA 94105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Staton Hughes

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 2245554

Amount of Each Receipt this Period

250.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Julie G. Lowenberg

Mailing Address 5321 Drane Drive

City State Zip Code  
Dallas TX 75209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 2243735

Amount of Each Receipt this Period

50.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Chella Periyanyagam

Mailing Address 200 Lakeside Court

City State Zip Code  
Hanson KY 42413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243817

Amount of Each Receipt this Period

10.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 943 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Lark Will Mailing Address 10003 Deercreek Club Rd E City Jacksonville State FL Zip Code 32256 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID: 2243799</b> Amount of Each Receipt this Period 50.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Paula Cooper Mailing Address 465 West 23rd Street PH B City New York State NY Zip Code 10011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 10 / 2007 <b>Transaction ID: 2243721</b> Amount of Each Receipt this Period 250.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Louise Sause Mailing Address 450 Burgundy Sq Apt 201 City East Lansing State MI Zip Code 48823 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		Date of Receipt MM / DD / YYYY 05 / 11 / 2007 <b>Transaction ID: 2243794</b> Amount of Each Receipt this Period 50.00 Kirsten Gillibrand Contributions <b>[MEMO ITEM]</b> MEMO
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 944 / 963

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)  
Ms. Ellen M. Kemp  
Mailing Address 184 Clover Lane

City State Zip Code  
Princeton NJ 08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Princeton Univ

Occupation  
Systems Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 2243769

Amount of Each Receipt this Period

100.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**B.** Full Name (Last, First, Middle Initial)  
Mr. Al Erdi  
Mailing Address 4311 Farmfield Court

City State Zip Code  
Baldwin MD 21013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 2247603

Amount of Each Receipt this Period

50.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jacqueline E Boynton  
Mailing Address 3945 N. Harcourt Place

City State Zip Code  
Milwaukee WI 53211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Law Office of Jacqueline  
Boynton

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: 2242138

Amount of Each Receipt this Period

100.00

Kirsten Gillibrand Contri-  
butions

**[MEMO ITEM]**  
MEMO

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

645160.53



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 945 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Allyson Schwartz for Congress

Mailing Address PO Box 45706

City State Zip Code  
 Philadelphia PA 19149

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.39

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247660

Amount of Each Receipt this Period

447.36

In-Kind

Full Name (Last, First, Middle Initial)

**B.** Giffords for Congress

Mailing Address PO Box 27565

City State Zip Code  
 Tucson AZ 85726

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247673

Amount of Each Receipt this Period

132.06

In-Kind

Full Name (Last, First, Middle Initial)

**C.** Gillibrand for Congress

Mailing Address PO Box 1279

City State Zip Code  
 Hudson NY 12534

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247676

Amount of Each Receipt this Period

113.04

In-Kind

**SUBTOTAL** of Receipts This Page (optional) .....

692.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 946 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.** Full Name (Last, First, Middle Initial)

Klobuchar for Minnesota

Mailing Address PO Box 4146

City State Zip Code  
 Saint Paul MN 55104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1877.69

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247543

Amount of Each Receipt this Period

585.96

In-Kind

**B.** Full Name (Last, First, Middle Initial)

McCaskill for Missouri

Mailing Address PO Box 300077

City State Zip Code  
 Saint Louis MO 63130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.80

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247654

Amount of Each Receipt this Period

151.50

In-Kind

**C.** Full Name (Last, First, Middle Initial)

Re-Elect Maria Cantwell 2006

Mailing Address PO Box 61528

City State Zip Code  
 Vancouver WA 98666

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1745.16

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247697

Amount of Each Receipt this Period

450.06

In-Kind

**SUBTOTAL** of Receipts This Page (optional) .....

1187.52

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 947 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** Stabenow for Senate

Mailing Address PO Box 4945

City State Zip Code  
East Lansing MI 48826

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1404.41

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247657

Amount of Each Receipt this Period

419.28

In-Kind

Full Name (Last, First, Middle Initial)

**B.** Woolsey for Congress

Mailing Address PO Box 750176

City State Zip Code  
Petaluma CA 94975

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247685

Amount of Each Receipt this Period

71.40

In-Kind

Full Name (Last, First, Middle Initial)

**C.** Melissa Bean for Congress

Mailing Address PO Box 3068

City State Zip Code  
Barrington IL 06011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

193.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: 2247695

Amount of Each Receipt this Period

69.36

In-Kind

**SUBTOTAL** of Receipts This Page (optional) .....

560.04

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 948 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address PO Box 5419 City Tampa State FL Zip Code 33675 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 170.54		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2247696</b> Amount of Each Receipt this Period 61.86 In-Kind
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Mazie Hirono Mailing Address PO Box 677 City Honolulu State HI Zip Code 96809 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 135.98		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2247699</b> Amount of Each Receipt this Period 56.10 In-Kind
<b>C.</b> Full Name (Last, First, Middle Initial) Betty Sutton for Congress Mailing Address 1700 W Market Street 155 City Akron State OH Zip Code 44313 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 81.81		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID: 2247698</b> Amount of Each Receipt this Period 30.06 In-Kind

**SUBTOTAL** of Receipts This Page (optional) .....

148.02

**TOTAL** This Period (last page this line number only) .....

2588.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 949 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Celco Mailing Address 9663-C Main Street City Fairfax State VA Zip Code 22032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 5158</b> Amount of Each Receipt this Period 3638.69 List rental refund At fair market value
<b>B.</b> Full Name (Last, First, Middle Initial) Premium Payment Services Mailing Address PO Box 1998 City Alpharetta State GA Zip Code 30023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 5159</b> Amount of Each Receipt this Period 37.49 Health Insurance at Fair Market Value Orig Vendor Guardian
<b>C.</b> Full Name (Last, First, Middle Initial) Production Solutions Mailing Address 1953 Gallows Road Suite 600 City Vienna State VA Zip Code 22182 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID: 5161</b> Amount of Each Receipt this Period 4.09 Printing refund At Fair Market Value

**SUBTOTAL** of Receipts This Page (optional) .....

**3680.27**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 950 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A.** New York State Insurance Fund

Mailing Address One Watervliet Avenue Ext.

City State Zip Code  
 Albany NY 12203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 3 / 2 0 0 7

Transaction ID: 5160

Amount of Each Receipt this Period

602.33

Worker's Comp Insurance  
Refund

At Fair Market Value

Full Name (Last, First, Middle Initial)

**B.** US Post Office

Mailing Address 1050 Connecticut Ave, NW

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 0 7

Transaction ID: 5162

Amount of Each Receipt this Period

433.00

Postage Refund

At Fair Market Value

Full Name (Last, First, Middle Initial)

**C.** United Parcel Service

Mailing Address P. O. Box 7247-0244

City State Zip Code  
 Philadelphia PA 19170

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 5163

Amount of Each Receipt this Period

4.45

Shipping Refund

At Fair Market Value

**SUBTOTAL** of Receipts This Page (optional) .....

1039.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 951 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Grassroots Solutions Mailing Address 1120 Connecticut Ave, NW Suite 1100 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 5164</b> Amount of Each Receipt this Period 3.90 Postage at Fair Market Value Original Vendor: US Post Office
<b>B.</b> Full Name (Last, First, Middle Initial) Grassroots Solutions Mailing Address 1120 Connecticut Ave, NW Suite 1100 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 5165</b> Amount of Each Receipt this Period 57.33 Telephone at Fair Market Value Orig Vendor: Working Assets
<b>C.</b> Full Name (Last, First, Middle Initial) Grassroots Solutions Mailing Address 1120 Connecticut Ave, NW Suite 1100 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 5166</b> Amount of Each Receipt this Period 12.50 Office Supplies at Fair Market Value Orig Vendor: Ikon Office Solutions

**SUBTOTAL** of Receipts This Page (optional) .....

**73.73**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 952 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Grassroots Solutions Mailing Address 1120 Connecticut Ave, NW Suite 1100 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 5167</b> Amount of Each Receipt this Period 210.00 Parking at Fair Market Value Orig Vendor: Colonial Parking
<b>B.</b> Full Name (Last, First, Middle Initial) Sabrina Brown Mailing Address 3730 5th St P.O. Box 1265 City North Beach State MD Zip Code 20714 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 5168</b> Amount of Each Receipt this Period 4.90 Telephone at Fair Market Value Orig Vendor: Working Assets
<b>C.</b> Full Name (Last, First, Middle Initial) Sabrina Brown Mailing Address 3730 5th St P.O. Box 1265 City North Beach State MD Zip Code 20714 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 5169</b> Amount of Each Receipt this Period 62.39 Shipping at Fair Market Value Orig Vendor: UPS

**SUBTOTAL** of Receipts This Page (optional) .....

277.29

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 953 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ellen Malcolm		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1120 Connecticut Ave, NW Suite 1100		<b>Transaction ID:</b> 5170
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 0.04	
FEC ID number of contributing federal political committee. <b>C</b>	Telephone at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: Working Assets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ellen Malcolm		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1120 Connecticut Ave, NW Suite 1100		<b>Transaction ID:</b> 5171
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 17.37	
FEC ID number of contributing federal political committee. <b>C</b>	Shipping at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: UPS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Dana Jones		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 21766 Cypress Valley Terrace		<b>Transaction ID:</b> 5172
City Sterling State VA Zip Code 20166	Amount of Each Receipt this Period 4.73	
FEC ID number of contributing federal political committee. <b>C</b>	Telephone at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: Working Assets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

**SUBTOTAL** of Receipts This Page (optional) .....

22.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 954 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Dana Jones		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 21766 Cypress Valley Terrace		<b>Transaction ID:</b> 5173	
City Sterling	State VA	Zip Code 20166	Amount of Each Receipt this Period 33.47
FEC ID number of contributing federal political committee. C		Postage at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: US Post Office	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		
<b>B.</b> Full Name (Last, First, Middle Initial) Dave McGonagle		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 4857 Battery Lane Apt 506		<b>Transaction ID:</b> 5174	
City Bethesda	State MD	Zip Code 20814	Amount of Each Receipt this Period 9.35
FEC ID number of contributing federal political committee. C		Postage at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: US Post Office	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		
<b>C.</b> Full Name (Last, First, Middle Initial) Dave McGonagle		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 4857 Battery Lane Apt 506		<b>Transaction ID:</b> 5175	
City Bethesda	State MD	Zip Code 20814	Amount of Each Receipt this Period 0.44
FEC ID number of contributing federal political committee. C		Telephone at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: Working Assets	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

**SUBTOTAL** of Receipts This Page (optional) .....

43.26

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 955 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Jane Volk Mailing Address 541 E. Nelson Avenue City Alexandria State VA Zip Code 22301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 05 / 15 / 2007 <b>Transaction ID:</b> 5176 Amount of Each Receipt this Period 1.50 Postage at Fair Market Value Orig Vendor: US Post Office
<b>B.</b> Full Name (Last, First, Middle Initial) Susan Markham Mailing Address 1402 Emerson Street, NW City Washington State DC Zip Code 20011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 05 / 15 / 2007 <b>Transaction ID:</b> 5177 Amount of Each Receipt this Period 1.51 Telephone at Fair Market Value Orig Vendor: Working Assets
<b>C.</b> Full Name (Last, First, Middle Initial) Susan Markham Mailing Address 1402 Emerson Street, NW City Washington State DC Zip Code 20011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 05 / 15 / 2007 <b>Transaction ID:</b> 5178 Amount of Each Receipt this Period 3.54 Postage at Fair Market Value Orig Vendor: US Post Office

**SUBTOTAL** of Receipts This Page (optional) .....

6.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 956 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Ha Hoa Dang		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 2741 Woodley Place		<b>Transaction ID:</b> 5179
City Falls Church	State VA	Amount of Each Receipt this Period 0.05
Zip Code 22046	FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value
Name of Employer	Occupation	Orig Vendor: Working Assets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ha Hoa Dang		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 2741 Woodley Place		<b>Transaction ID:</b> 5180
City Fall Church	State VA	Amount of Each Receipt this Period 64.26
Zip Code 22046	FEC ID number of contributing federal political committee. C	Postage at Fair Market Value
Name of Employer	Occupation	Orig Vendor: US Post Office
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kate Chapek		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1435 N Street, NW Apt 202		<b>Transaction ID:</b> 5181
City Washington	State DC	Amount of Each Receipt this Period 0.39
Zip Code 20007	FEC ID number of contributing federal political committee. C	Postage at Fair Market Value
Name of Employer	Occupation	Orig Vendor: US Post Office
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

**SUBTOTAL** of Receipts This Page (optional) .....

64.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 957 / 963

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Kate Chapek Mailing Address 1435 N Street, NW Apt 202 City Washington State DC Zip Code 20007 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 5182</b> Amount of Each Receipt this Period 14.95 Shipping at Fair Market Value Orig Vendor: UPS
<b>B.</b> Full Name (Last, First, Middle Initial) Laila Mohib Mailing Address 616 E Street N.W. Apt 712 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 5183</b> Amount of Each Receipt this Period 0.48 Telephone at Fair Market Value Orig Vendor: Working Assets
<b>C.</b> Full Name (Last, First, Middle Initial) Laila Mohib Mailing Address 616 E Street N.W. Apt 712 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID: 5184</b> Amount of Each Receipt this Period 1.50 Postage at Fair Market Value Orig Vendor: US Post Office

**SUBTOTAL** of Receipts This Page (optional) .....

16.93

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 958 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Lisa Robillard		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 4326 South 36th Street		<b>Transaction ID:</b> 5185
City Arlington	State VA	Zip Code 22206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.67
Name of Employer	Occupation	Postage at Fair Market Value
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	Orig Vendor: US Post Office

<b>B.</b> Full Name (Last, First, Middle Initial) Becca Runyan		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 324 5th Street SE		<b>Transaction ID:</b> 5186
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 56.53
Name of Employer	Occupation	Telephone at Fair Market Value
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	Orig Vendor: Working Assets

<b>C.</b> Full Name (Last, First, Middle Initial) Colleen Medlock		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 2400 16th Street NW		<b>Transaction ID:</b> 5187
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.39
Name of Employer	Occupation	Postage at Fair Market Value
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	Orig Vendor: US Post Office

**SUBTOTAL** of Receipts This Page (optional) .....

59.59

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 959 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)

Grassroots Solutions

Mailing Address 1120 Connecticut Ave, NW  
Suite 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 5191

Amount of Each Receipt this Period

4200.00

Rent at Fair Market Value

Original Vendor Jack Bender

B. Full Name (Last, First, Middle Initial)

Kellie Dupree

Mailing Address 1644 Florida Ave, NW

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 5188

Amount of Each Receipt this Period

1.74

Postage at Fair Market Value

Orig Vendor: US Post Office

C. Full Name (Last, First, Middle Initial)

Kim Coleman

Mailing Address 1765 Swann St, NW  
Apt 1

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 5189

Amount of Each Receipt this Period

1.95

Postage at Fair Market Value

Orig Vendor: US Post Office

SUBTOTAL of Receipts This Page (optional) .....

4203.69

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 960 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Sara Little		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1500 Massachusetts Ave NW Apt 727		<b>Transaction ID:</b> 5190
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1.89	
FEC ID number of contributing federal political committee. C	Postage at Fair Market Value	
Name of Employer Occupation	Orig Vendor: US Post Office	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	
<b>B.</b> Full Name (Last, First, Middle Initial) Kellie Dupree		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 1644 Florida Ave, NW		<b>Transaction ID:</b> 5195
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 1.00	
FEC ID number of contributing federal political committee. C	Travel/Accommodation Refund	
Name of Employer Occupation	Orig Vendor: Kellie Dupree	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

**SUBTOTAL** of Receipts This Page (optional) .....

2.89

**TOTAL** This Period (last page this line number only) .....

9490.82



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 961 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

<b>A.</b> Full Name (Last, First, Middle Initial) Merrill Lynch Mailing Address 1850 K St, NW City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 106.96		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 5192</b> Amount of Each Receipt this Period 42.23 Dividend
<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address 1501 Pennsylvania Ave, NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 13949.37		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID: 5194</b> Amount of Each Receipt this Period 4035.64 Sweep Interest
<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address 1501 Pennsylvania Ave, NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1053.17		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 7 <b>Transaction ID: 5193</b> Amount of Each Receipt this Period 223.06 Interest

**SUBTOTAL** of Receipts This Page (optional) .....

**4300.93**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 962 / 963

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.**

Full Name (Last, First, Middle Initial)

Merrill Lynch

Mailing Address 1850 K St, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 5196

Amount of Each Receipt this Period

3371.34

Sale of 60 shs Fiserv Inc

Cntrb H. Johnston reported  
5/23/07

**SUBTOTAL** of Receipts This Page (optional) .....

3371.34

**TOTAL** This Period (last page this line number only) .....

7672.27

Form/Schedule: **H4& 21B** No expenditures reported on Lines 21a or 21b were made on behalf of federal candidates.

Transaction ID:

\*\*\*\*\*