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### FEC FORM 3X

FE6AN026

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT 430 SOUTH CAPITOL STREET SE ADDRESS (number and street) Check if different than previously WASHINGTON DC 20003 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE A CITY A IS THIS **AMENDED** NEW C00460147 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 2009 30 2009 1 1 11 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **Andrew Tobias** Type or Print Name of Treasurer Electronically Filed by **Andrew Tobias** 02 09 2010 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004) Only

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/37

FEC Form 3X (Rev. 02/2003)

| 2009 T                  | o: 11 30 Y Y Y Y Y Y Y  |
|-------------------------|---|
| COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date   |
|                         | 0.00  |
| 541860.00               |   |
| 194262.41               | 1166706.62  |
|                         |   |
| 736122.41               | 1166706.62  |
| 128196.02               | 558780.23   |
| 607926.39               | 607926.39   |
|                         |   |
| 0.00                    |   |
| 0.00                    |   |
| (see FEC FORM 1M)       |   |
|                         | COLUMN A This Period  541860.00  194262.41  736122.41  128196.02  607926.39 |

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. 06/2004) 3 / 37

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

| I. Receipts |  | I. Receipts COLUMN A Total This Period Calc |            |  |  |
|-------------|--|---|------------|--|--|
| 11.         | Contributions (other than loans) From: (a) Individuals/Persons Other                     |   |            |  |  |
|             | Than Political Committees (i) Itemized (use Schedule A)                                  | 0.00  | 0.00       |  |  |
|             | (ii) Unitemized  | 0.00  | 0.00       |  |  |
|             | (iii) TOTAL (add Lines 11(a)(i) and (ii)   | 0.00  | 0.00       |  |  |
|             | (b) Political Party Committees   | 0.00  | 0.00       |  |  |
|             | (c) Other Political Committees (such as PACs)  | 0.00  | 0.00       |  |  |
|             | 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)                                | 0.00  | 0.00       |  |  |
| 12.         | Transfers From Affiliated/Other Party Committees   | 0.00  | 0.00       |  |  |
| 13.         | All Loans Received   | 0.00  | 0.00       |  |  |
|             | Loan Repayments Received Offsets To Operating Expenditures                               | 0.00  | 0.00       |  |  |
| 16.         | (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made | 194262.41                                   | 1166706.62 |  |  |
|             | to Federal candidates and Other Political Committees                                     | 0.00  | 0.00       |  |  |
| 17.         | Other Federal Receipts (Dividends, Interest, etc.)                                       | 0.00  | 0.00       |  |  |
| 18.         | Transfers from Non-Federal and Levin Funds   |   |            |  |  |
|             | (a) Non-Federal Account (from Schedule H3)   | 0.00  | 0.00       |  |  |
|             | (b) Levin Funds (from Schedule H5)   | 0.00  | 0.00       |  |  |
|             | (c) Total Transfer (add 18(a) and 18(b)).  | 0.00  | 0.00       |  |  |
| 19.         | Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))                      | 194262.41                                   | 1166706.62 |  |  |
| 20.         | Total Federal Receipts (subtract Line 18(c) from Line 19)                                | 194262.41                                   | 1166706.62 |  |  |

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003) of Disbut

of Disbursements

4 / 37

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| Operating Expenditures:     (a) Shared Federal/Non-Federal                       |                               |                                   |
| Activity (from Schedule H4)  | 0.00                          | 0.00                              |
| (i) Federal Share  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share   | 0.00                          | 0.00                              |
| (b) Other Federal Operating  |                               |                                   |
| Expenditures   | 128196.02                     | 552085.23                         |
| (c) Total Operating Expenditures   | 100100.00                     | FF000F 00                         |
| (add 21(a)(i), (a)(ii) and (b))  | 128196.02                     | 552085.23                         |
| Transfers to Affiliated/Other Party     Committees                               | 0.00                          | 6695.00                           |
| 3. Contributions to  | 0.00                          | 0000.00                           |
| Federal Candidates/Committeesand Other Political Committees                      | 0.00                          | 0.00                              |
| Independent Expenditure  |                               |                                   |
| (use Schedule E)   | 0.00                          | 0.00                              |
| 5. Coordinated Expenditures Made by Party  | 2.00                          | 0.00                              |
| Committees (2 U.S.C. 441a(d))<br>(use Schedule F)                                | 0.00                          | 0.00                              |
| O Loro Brown at Made   | 0.00                          | 0.00                              |
| 6. Loan Repayments Made  |                               | 0.00                              |
| 7. Loans Made  | 0.00                          | 0.00                              |
| 8. Refunds of Contributions To:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                          | 0.00                          | 0.00                              |
| main ontica committees   |                               |                                   |
| (b) Political Party Committees   | 0.00                          | 0.00                              |
| (c) Other Political Committees   | 0.00                          | 0.00                              |
| (such as PACs)   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds   | 0.00                          | 0.00                              |
| (add Lines 28(a), (b), and (c))  | 0.00                          | 0.00                              |
| 9. Other Disbursements   | 0.00                          | 0.00                              |
| Federal Election Activity (2 U.S.C 431(20))                                      |                               |                                   |
| (a) Shared Federal Election Activity   |                               |                                   |
| (from Schedule H6)   |                               |                                   |
| (i) Federal Share  | 0.00                          | 0.00                              |
|  | 0.00                          | 0.00                              |
| (ii) "Levin" Share   | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely                                      | 0.00                          | 0.00                              |
| With Federal Funds   | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add<br>Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00                          | 0.00                              |
| Total Disbursements (add Lines 21(c), 22,  |                               |                                   |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c))   | 128196.02                     | 558780.23                         |
|  |                               |                                   |
| 2. Total Federal Disbursements  (cubtract Line 31(a)(ii) and Line 30(a)(ii)      |                               |                                   |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)                        | 128196.02                     | 558780.23                         |
| 110111 LITTO 1 /   | 120130.02                     | 330700.23                         |

### **DETAILED SUMMARY PAGE**

of Disbursements

|     | III. Net Contributions/Operating Expenditures                           | COLUMN A Total This Period | COLUMN B Calendar Year-to-Dat |  |
|-----|---|----------------------------|-------------------------------|--|
| 33. | Total Contributions (other than loans) from Line 11(d), page 3)         | 0.00                       | 0.00                          |  |
| 34. | Total Contribution Refunds<br>(from Line 28(d))                         | 0.00                       | 0.00                          |  |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33)    | 0.00                       | 0.00                          |  |
| 36. | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 128196.02                  | 552085.23                     |  |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3)                | 194262.41                  | 1166706.62                    |  |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36)              | -66066.39                  | -614621.39                    |  |

FE6AN026

## SCHEDULE A (FEC Form 3X)

| Any information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any property of the name | Date of Receipt  Transaction ID: SA15-492  Amount of Each Receipt this Period  Date of Receipt  To Date of Receipt  Date of Receipt  To Date of Receipt  Date of Receipt  Date of Receipt  Transaction ID: SA15-469  Amount of Each Receipt this Period |
|---|---|
| NEW JERSEY DEMOCRATIC PARTY  Mailing Address 194-196 WEST STATE STREET  City State Zip Cod TRENTON NJ 08608  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Aggregate Year-to-Date Other (specify) ▼  Full Name (Last, First, Middle Initial) McMahon for Congress  Mailing Address 66 Arnold Street  City State Zip Cod NY 10301  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Aggregate Year-to-Date Occupation  Full Name (Last, First, Middle Initial)  | Transaction ID: SA15-492  Amount of Each Receipt this Period  50912.50  Date of Receipt  1 1 0 2 2 0 0 9  Tournsaction ID: SA15-492  Amount of Each Receipt this Period  Transaction ID: SA15-469  Amount of Each Receipt this Period                   |
| Full Name (Last, First, Middle Initial)  McMahon for Congress  Mailing Address 66 Arnold Street  City State Zip Cod  Staten Island NY 10301  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  | 2250.00   |
| Mailing Address 5 South Side Drive, No. 224  City State Zip Cod Clifton Park NY 12065  FEC ID number of contributing federal political committee.   | Date of Receipt    M  |
| Name of Employer  Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)   | ▼<br>5750.00  |

## SCHEDULE A (FEC Form 3X)

| SCHEDULE A (FEC Form 3X<br>ITEMIZED RECEIPTS  | Use separate schedule for each category of the Detailed Summary Pag                   | (Check drily drie)   |
|---|---|--|
| NAME OF COMMITTEE (In Full)   | d Statements may not be sold or used by an the name and address of any political comm | y person for the purpose of soliciting contributions ittee to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Murray Victory 2010 Mailing Address 1341 G Street, NW,  City Washington  FEC ID number of contributing federal political committee. | Suite 740  State Zip Code DC 20005  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Name of Employer  Receipt For:  Primary  General  Other (specify) ▼   | Occupation  Aggregate Year-to-Date ▼  17930.0   | 10   |
| Full Name (Last, First, Middle Initial) Citizens Committee to Elect Tim Murray Mailing Address 16 Vassar Street   |   | Date of Receipt  1 1 0 4 2 0 0 9   |
| City  | State Zip Code  | Transaction ID: SA15-471   |
| Worcester   | MA 01602  | Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.  | C   | 11054.41   |
| Name of Employer  | Occupation  |  |
| Receipt For: Primary General Other (specify)  | Aggregate Year-to-Date ▼ 11054.4  | 1  |
| Full Name (Last, First, Middle Initial)   |   | Date of Descript   |
| Bill Owens for Congress  Mailing Address 42 Blue Heron Way  |   | Date of Receipt  1 1 0 4 2 0 0 9   |
| City  | State Zip Code  | Transaction ID: SA15-470   |
| Plattsburgh  FEC ID number of contributing federal political committee.   | NY 12901  | Amount of Each Receipt this Period  12250.00   |
| Name of Employer  | Occupation  |  |
| Receipt For: Primary General Other (specify)  | Aggregate Year-to-Date ▼ 18250.0  | 0 0  |
| SUBTOTAL of Receipts This Page (optional  | )   | 39234.41   |

|    | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  |                                | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 8/37 (check only one)  11a 11b 11c 12 13 14 X 15 16 17                |
|----|---|--------------------------------|---|---|
|    | Any information copied from such Reports and S or for commercial purposes, other than using the | Statements ma<br>e name and ad | ly not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|    | NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITT   | EE - TRAVE                     | EL OFFSET ACCOUNT   |   |
| Α. | Full Name (Last, First, Middle Initial) Murray Victory 2010                                     |                                |   | Date of Receipt   |
|    | Mailing Address 1341 G Street, NW, S  | uite 740                       |   | 11 1 10 2009  |
|    | City<br>Washington  | State<br>DC                    | Zip Code<br>20005   | Transaction ID: SA15-473  Amount of Each Receipt this Period                                |
|    | FEC ID number of contributing federal political committee.                                      | C                              |   | 2000.00   |
|    | Name of Employer  | Occupation                     | on  |   |
|    | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                      | e Year-to-Date ▼<br>17930.00  |   |
| В. | Full Name (Last, First, Middle Initial) MICHIGAN DEMOCRATIC PARTY Mailing Address 606 TOWNSEND  |                                |   | Date of Receipt   |
|    |   | 01-1-                          | 7's Oads  | 11 12 2009  |
|    | City<br>LANSING   | State<br>MI                    | Zip Code<br>48933   | Transaction ID: SA15-475  Amount of Each Receipt this Period                                |
|    | FEC ID number of contributing federal political committee.                                      | С                              |   | 14800.00  |
|    | Name of Employer  | Occupation                     | on  |   |
|    | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                      | e Year-to-Date ▼<br>14800.00  |   |
| С. | Full Name (Last, First, Middle Initial) Dina Titus for Congress                                 | <u> </u>                       |   | Date of Receipt   |
|    | Mailing Address P.O. Box 50614  |                                |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|    | City  | State                          | Zip Code  | Transaction ID: SA15-474  |
|    | Henderson  FEC ID number of contributing federal political committee.                           | C                              | 89016   | Amount of Each Receipt this Period 29975.00   |
|    | Name of Employer  | Occupation                     | on  |   |
|    | Receipt For: Primary General Other (specify)  | Aggregate                      | e Year-to-Date ▼<br>29975.00  |   |
|    | SUBTOTAL of Receipts This Page (optional) .   | 1                              |   | 46775.00  |
|    | TOTAL This Period (last page this line number   | only)                          |   |   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 9 / 37 (check only one)  11a 11b 11c 12 13 14 X 15 16 17                           |
|--|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMIT  | Statements may not be sold or used by any pers e name and address of any political committee to TEE - TRAVEL OFFSET ACCOUNT | on for the purpose of soliciting contributions o solicit contributions from such committee.              |
| Full Name (Last, First, Middle Initial) Martin Heinrich for Congress  Mailing Address 2118 Central Ave. SE  City Albuquerque  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General | State Zip Code NV 87106  C Occupation  Aggregate Year-to-Date   17215.00  | Date of Receipt    M M M   |
| Full Name (Last, First, Middle Initial) Independent Voices for Arizona Mailing Address 2910 E. Gary Road  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:                       | State Zip Code AZ 85012  C  Occupation  Aggregate Year-to-Date ▼  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) IOWA DEMOCRATIC PARTY Mailing Address 5661 FLEUR DRIVE  City DES MOINES  FEC ID number of contributing federal political committee.  Name of Employer         | State Zip Code IA 50321  C Occupation   | Date of Receipt  1 1 1 9 2 0 0 9  Transaction ID: SA15-478  Amount of Each Receipt this Period  21120.00 |
| Receipt For:  Primary General  Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  | Aggregate Year-to-Date ▼ 21120.00   | 49340.50   |

В.

C.

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

SUBTOTAL of Disbursements This Page (optional) ...

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

FOR LINE NUMBER: PAGE 10/37 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-326 **BRADLEY BECNEL** Date of Disbursement 0 3้ 1 1 2009 Mailing Address 840 TCHOUPITOULAS #224 City State Zip Code Amount of Each Disbursement this Period **NEW ORLEANS** 70130 LA 554.00 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-327 JESSICA BLAKEMORE Date of Disbursement 0 3้ 2009 Mailing Address 2000 N STREET, NW APT. 701 City State Zip Code Amount of Each Disbursement this Period WASHINGTON 20036 DC 427.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-328 **ALAN BRAY** Date of Disbursement 03 2009 Mailing Address 14 Q STREET, NE UNIT B City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20002 488.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

 $\blacktriangleright$ 

1469.00

C.

| ago,, 10000011071   |   |                      |   |
|---|---|----------------------|---|
| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the | FOR LINE (check only | 1 1 1 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |
|   | Detailed Summary Page                             | 27                   | 28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                      |   |
| NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFSET ACCC                                | DUNT                 |   |
| Full Name (Last, First, Middle Initial) CAROLINE COSCIA   |   |                      | Transaction ID: SB21B-329 Date of Disbursement  |
| Mailing Address 3460 14TH STREET, NW  | APT. #102   |                      | 111 0 3 7 2 0 0 9   |
| ,   | State Zip Code<br>DC 20010                        |                      | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Travel Expense  |   | • •                  | 304.25  |
| Candidate Name  |   | Category/<br>Type    |   |
| Office Sought: House Disburse Senate President State: District:   | ment For: Primary General Other (specify)         | ,                    |   |
| Full Name (Last, First, Middle Initial)   |   |                      | T .: ID OD04D 000   |
| ELIZABETH D'AUNNO   |   |                      | Transaction ID: SB21B-330 Date of Disbursement  |
| Mailing Address 15 WOODLAND HEIGHT  | 'S NE   |                      | $\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&1&M\end{smallmatrix}\end{bmatrix}^{\prime}\begin{bmatrix}\begin{smallmatrix}D&D&D\\0&3\end{smallmatrix}\end{bmatrix}^{\prime}\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&0&9\end{smallmatrix}\end{bmatrix}^{\prime}$ |
|   | State Zip Code                                    |                      | Amount of Each Disbursement this Period   |
| OWA CITY  Purpose of Disbursement   | IA 52240  |                      | 587.47  |
| Travel Expense  |   |                      |   |
| Candidate Name  |   | Category/<br>Type    |   |
| Senate President  | ment For: Primary General Other (specify) ▼       |                      |   |
| State: District: Full Name (Last, First, Middle Initial)  |   |                      |   |
| CRAIG MINASSIAN   |   |                      | Transaction ID: SB21B-331 Date of Disbursement  |
| Mailing Address 85 SOUTH STREET #5-N  | l   |                      | 1 1 M 1 M / D 0 3 / Y 2 0 0 9 Y   |
|   | State Zip Code<br>NY 10038                        |                      | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |   | • •                  | 427.00  |
| Travel & Subsistence Expense Reimb  Candidate Name  |   | Category/            |   |
| Senate  | ment For: Primary General                         | Туре                 |   |
| President State: District:  | Other (specify)                                   |                      |   |
| SUBTOTAL of Disbursements This Page (optional) .  |   | <b>)</b>             | 1318.72   |

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

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                     | FOR LI            |                      |                |              |          | GE 12/37 |           |  |
|---|--|-------------------|----------------------|----------------|--------------|----------|----------|-----------|--|
| ITEMIZED DISBURSEMENTS  | for each category of the                     | (Crieck           | only one)            | ا مہ ا         |              |          | 7 05 -   |           |  |
|   | Detailed Summary Page                        | X 21b             | 22<br>28a            | 23<br>28b      | 24<br>28c    | $\vdash$ | 25<br>29 | 26<br>30b |  |
| Any Information copied from such Reports and Staten             |  | d by any perso    | on for the purpo     | ose of so      | oliciting co |          | outions  |           |  |
| or for commercial purposes, other than using the nam            | e and address of any politica                | I committee to    | solicit contribu     | utions fro     | m such o     | comr     | nittee   |           |  |
| NAME OF COMMITTEE (In Full)                                     | TDAVEL OFFORT AGG                            | OUNT              |                      |                |              |          |          |           |  |
| DEMOCRATIC NATIONAL COMMITTEE -                                 | · TRAVEL OFFSET ACC                          | OUNT              |                      |                |              |          |          |           |  |
| Full Name (Last, First, Middle Initial) JULIE MULZOFF           |  |                   | Transac<br>Date of I |                | SB21I        | B-33     | 32       |           |  |
| Mailing Address 320 WEST OAKDALE, U                             | JNIT 1402                                    |                   | 111                  | <sup>/</sup> 0 | 3 /          | Ž        | o ŏ s    | ) Y       |  |
| City<br>CHICAGO   | State Zip Code<br>IL 60657                   |                   | Amount               | of Each        | Disburse     | emen     | t this I | Period    |  |
| Purpose of Disbursement Travel & Subsistence Expense Reimb      |  |                   | <u> </u>             |                |              | 4        | 88.00    | )         |  |
| Candidate Name  |  | Category/<br>Type | ,                    |                |              |          |          |           |  |
| Senate President  | ement For: Primary General Other (specify)   |                   |                      |                |              |          |          |           |  |
| State: District:  |  |                   |                      |                |              |          |          |           |  |
| Full Name (Last, First, Middle Initial) PAUL NEAVILLE           |  |                   | Date of I            | Disburse       |              |          |          | _         |  |
| Mailing Address 4324 BRANDYWINE ST                              | REET, NW                                     |                   | 111                  | <sup>′</sup> 0 | 3 /          | Ž        | 0 ŏ s    | ) Y       |  |
| City<br>WASHINGTON  | State Zip Code<br>DC 20016                   |                   | Amount               | of Each        | Disburse     | -        |          |           |  |
| Purpose of Disbursement Travel & Subsistence Expense Reimb      |  |                   |                      |                |              | . 4      | 27.00    | )         |  |
| Candidate Name  |  | Category/<br>Type |                      |                |              |          |          |           |  |
| Office Sought: House Disburse Senate President State: District: | ement For: Primary General Other (specify) ▼ |                   |                      |                |              |          |          |           |  |
| Full Name (Last, First, Middle Initial) TYLER NORMAN            |  |                   | Transac<br>Date of I |                |              | B-33     | 34       |           |  |
| Mailing Address 164 WAVERLY PLACE,                              | #4B  |                   | 111                  | 0              | 3 /          | Ž        | 0 0 9    | ) Y       |  |
| City<br>NEW YORK  | State Zip Code<br>NY 10014                   |                   | Amount               | of Each        | Disburse     | emen     | t this I | Period    |  |
| Purpose of Disbursement<br>Travel Expense                       |  |                   |                      |                |              | 4        | 72.00    | )         |  |
| Candidate Name  |  | Category/<br>Type |                      |                |              |          |          |           |  |
| Office Sought:  Senate President  State:  Disburse              | ement For: Primary General Other (specify)   |                   |                      |                |              |          |          |           |  |
| SUBTOTAL of Disbursements This Page (optional)                  |  |                   |                      |                |              | 138      | 87.00    |           |  |
| TOTAL This Period (last page this line number only)             |  |                   |                      |                |              |          |          |           |  |
|   |  |                   |                      |                |              |          |          |           |  |

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| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                       | FOR LINE           |   |
|---|--|--------------------|---|
| TEMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page | (check only 21b 27 | 22 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                    |   |
| NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFSET ACC                              | OUNT               |   |
| Full Name (Last, First, Middle Initial) PATRICK J SHEARNS   |  |                    | Transaction ID: SB21B-335 Date of Disbursement  |
| Mailing Address 124 MANTHORNE ROAL  | )  |                    | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $ |
| ,   | State Zip Code<br>MA 02132                     |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Travel & Subsistence Expense Reimb  |  | · · ·              | 488.00  |
| Candidate Name  |  | Category/<br>Type  |   |
| Senate President  | ment For: Primary General Other (specify)      |                    |   |
| State: District:  |  |                    |   |
| Full Name (Last, First, Middle Initial) RAE LYNN WARGO  |  |                    | Transaction ID: SB21B-336 Date of Disbursement  |
| Mailing Address 610 PGH. ROCHESTER  | ROAD   |                    | $\begin{bmatrix} 1 & 1 & M & M & M & M & M & M & M & M &$   |
| ,   | State Zip Code<br>PA 15005                     |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Travel & Subsistence Expense Reimb  |  |                    | 427.00  |
| Candidate Name  |  | Category/<br>Type  |   |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)      |                    |   |
| State: District:  | ·<br>  |                    |   |
| Full Name (Last, First, Middle Initial) ALESCIA TEEL  |  |                    | <b>Transaction ID:</b> SB21B-337 Date of Disbursement   |
| Mailing Address 63 CORYELL STREET, A  | APT. D   |                    | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 3 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $ |
|   | State Zip Code<br>NJ 08530                     |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Travel & Subsistence Expense Reimb  |  |                    | 488.00  |
| Candidate Name  |  | Category/<br>Type  |   |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)      |                    |   |
| State: District:  |  |                    |   |
| SURTOTAL of Dishursements This Page (ontional)  |  |                    | 1403.00   |

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## **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 14/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-338 STEVE AYSCUE Date of Disbursement 05 1 1 2009 Mailing Address 3 LOUCROFT ROAD City State Zip Code Amount of Each Disbursement this Period HADDONFIELD NJ 08033 488.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-339 JIM DENBO Date of Disbursement 05 2009 Mailing Address 6006 OVERLEA ROAD City State Zip Code Amount of Each Disbursement this Period **BETHESDA** MD 20816 488.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-340 **CORY FOX** Date of Disbursement 05 2009 Mailing Address **58 PLEASANT COURT** City State Zip Code Amount of Each Disbursement this Period FOSTER CITY CA 94404 533.00 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 1509.00 SUBTOTAL of Disbursements This Page (optional) ...

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

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| SCHEDULE B (FEC Form 3X)   | Use separate schedule(s)                       | FOR LINE (check only |  | PAGE 15/37                     |
| ITEMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page | X 21b                |  | 24                             |
|  | Detailed Garrinary Fage                        | 27                   |  | 28c 29 30b                     |
| Any Information copied from such Reports and Statem<br>or for commercial purposes, other than using the name |  |                      |  |                                |
| NAME OF COMMITTEE (In Full)  |  |                      |  |                                |
| DEMOCRATIC NATIONAL COMMITTEE -  | TRAVEL OFFSET ACC                              | OUNT                 |  |                                |
| Full Name (Last, First, Middle Initial) MARK HANNAH  |  |                      | Transaction ID: SE Date of Disbursemen | t                              |
| Mailing Address 503 W. 150TH STREET,   | APT. 6   |                      | 111 005                                | <sup>'</sup> 2009 <sup>'</sup> |
| ,  | State Zip Code<br>NY 10031                     |                      | Amount of Each Disb                    | ursement this Period           |
| Purpose of Disbursement Travel & Subsistence Expense Reimb   |  | · ·                  |  | 488.00                         |
| Candidate Name   |  | Category/<br>Type    |  |                                |
| Senate President   | ment For: Primary General Other (specify)      |                      |  |                                |
| State: District: Full Name (Last, First, Middle Initial)   |  |                      |  |                                |
| PATRICK J SHEARNS  |  |                      | Transaction ID: SE Date of Disbursemen | t                              |
| Mailing Address 124 MANTHORNE ROAL   | )  |                      | 11 05                                  | 2009                           |
| ,  | State Zip Code<br>MA 02132                     |                      | Amount of Each Disb                    | ursement this Period           |
| Purpose of Disbursement Travel & Subsistence Expense Reimb   |  | · ·                  |  | 488.00                         |
| Candidate Name   |  | Category/<br>Type    |  |                                |
| Senate President   | ment For: Primary General Other (specify)      |                      |  |                                |
| State: District: Full Name (Last, First, Middle Initial)   |  |                      |  |                                |
| MARK SMALL   |  |                      | Transaction ID: SE Date of Disbursemen | t                              |
| Mailing Address 635 KEEFER PLACE, NV   | V  |                      | 111 05                                 | 2009                           |
|  | State Zip Code<br>DC 20010                     |                      | Amount of Each Disb                    | oursement this Period          |
| Purpose of Disbursement Travel & Subsistence Expense Reimb   |  |                      |  | 488.00                         |
| Candidate Name   |  | Category/<br>Type    |  |                                |
| Office Sought: House Disburse Senate President   | ment For: Primary General Other (specify) ▼    |                      |  |                                |
| State: District:   | ·  |                      |  |                                |
| SUBTOTAL of Disbursements This Page (optional) .   |  | <b>&gt;</b>          |  | 1464.00                        |

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

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## **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 16/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-344 ALESCIA TEEL Date of Disbursement 05 1 1 2009 Mailing Address 63 CORYELL STREET, APT. D City State Zip Code Amount of Each Disbursement this Period LAMBERTVILLE NJ 08530 488.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-345 **BEVERLY HILTON** Date of Disbursement 13 2009 Mailing Address 9876 WILSHIRE BLVD. City State Zip Code Amount of Each Disbursement this Period **BÉVERLY HILLS** 90210 CA 1731.58 Purpose of Disbursement Lodging & Catering Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-346 MICHAEL BILLINGS Date of Disbursement 2009 Mailing Address 926 MALVERN AVENUE City State Zip Code Amount of Each Disbursement this Period SALT LAKE CITY UT 84106 329.90 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional) ...

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

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| SCHEDULE B (FEC Form 3X)   |  | FOR LINE          | NUMBER: PAGE 17/37  |
|--|--|-------------------|---|
| ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the      | (check only       |   |
|  | Detailed Summary Page                                  | 27                | 22 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam |  |                   |   |
| NAME OF COMMITTEE (In Full)  | cana address of any pointed                            |                   |   |
| DEMOCRATIC NATIONAL COMMITTEE  | TRAVEL OFFSET ACC                                      | OUNT              |   |
| Full Name (Last, First, Middle Initial) MICHAEL BILLINGS   |  |                   | Transaction ID: SB21B-347 Date of Disbursement  |
| Mailing Address 926 MALVERN AVENUE   |  |                   | $ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D & D \\ 1 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix} $  |
| City<br>SALT LAKE CITY   | State Zip Code<br>UT 84106                             |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Travel Expense   |  |                   | 520.15  |
| Candidate Name   |  | Category/<br>Type |   |
| Office Sought: House Disburse Senate President State: District:  | ement For: Primary General Other (specify)             |                   |   |
| Full Name (Last, First, Middle Initial)  |  |                   | Transaction ID: SB21B-348   |
| CROWNE PLAZA   |  |                   | Date of Disbursement  |
| Mailing Address 555 EAST CANAL STRE  | ET   |                   | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $ |
| City<br>RICHMOND   | State Zip Code<br>VA 23219                             |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>Lodging & Catering  |  |                   | 1989.21   |
| Candidate Name   |  | Category/<br>Type |   |
| Senate President   | ement For: Primary General Other (specify)             |                   |   |
| State: District:   |  |                   |   |
| Full Name (Last, First, Middle Initial) ENTERPRISE   |  |                   | Transaction ID: SB21B-349 Date of Disbursement  |
| Mailing Address P.O. BOX 840181  |  |                   | 1 1 M   |
| City<br>KANSAS CITY  | State         Zip Code           MO         64184-0181 |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>Car Rental  |  |                   | 888.87  |
| Candidate Name   |  | Category/<br>Type |   |
| Office Sought: House Disburse Senate President   | ement For:  Primary  Other (specify)                   | 71-               |   |
| State: District:   |  |                   |   |
| SUBTOTAL of Disbursements This Page (optional)   |  |                   | 3398.23   |

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| SCHEDULE B (FEC Form 3X)  |  |                   |     |           | E NUMBER: PAGE 18/37 |       |                        |           |       |     | 37           |       |           |        |
|---|--|-------------------|-----|-----------|----------------------|-------|------------------------|-----------|-------|-----|--------------|-------|-----------|--------|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page |                   |     | (check or |                      | nly c | ny one)<br>22 23 24 25 |           |       |     |              | ☐ 26  |           |        |
|   | Detailed Guill                                 | mary rage         |     | Ė         | 27                   |       | 28a                    |           | 28b   | t   | 28c          |       | 29        | 30b    |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                   |     |           |                      |       |                        |           |       |     |              |       |           | 8      |
| NAME OF COMMITTEE (In Full)   |  |                   |     |           |                      |       |                        |           |       |     |              |       |           |        |
| DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OF                                      | SET ACC           | OUI | NT        | -                    |       |                        |           |       |     |              |       |           |        |
| Full Name (Last, First, Middle Initial)   |  |                   |     |           |                      |       | Trans                  | acti      | on ID | ):  | SB21         | B-35  | 50        |        |
| FAIRMONT HOTEL  |  |                   |     |           |                      |       | Date                   |           |       |     |              |       |           |        |
| Mailing Address 200 N. COLUMBUS DR.   |  |                   |     |           |                      |       | 1 1                    | М         | / D   | 1 ( | 3 /          | 2     | o ŏ s     | 9 '    |
| •   |  | Code<br>0601      |     |           |                      |       | Amou                   | nt o      | f Eac | h [ | Disburs      | emer  | nt this I | Period |
| Purpose of Disbursement   | 12 00  | 1                 | _   | _         |                      |       |                        |           |       |     |              | 9     | 27.96     | 3      |
| Lodging & Catering  |  |                   |     |           |                      |       |                        |           |       |     |              |       |           |        |
| Candidate Name  |  |                   |     |           | gory/<br>pe          |       |                        |           |       |     |              |       |           |        |
| Office Sought: House Disburse   | ment For:                                      |                   |     | ı y       | pc                   | -     |                        |           |       |     |              |       |           |        |
| Senate  | Primary  | General           |     |           |                      |       |                        |           |       |     |              |       |           |        |
| President State: District:  | Other (specify)                                | ▼                 |     |           |                      |       |                        |           |       |     |              |       |           |        |
| State: District: Full Name (Last, First, Middle Initial)  |  |                   |     |           |                      |       |                        |           |       |     | 0004         | D 0/  |           |        |
| HERTZ Corporation   |  |                   |     |           |                      |       | Trans Date of          |           | -     |     | SB21<br>nent | B-3   | 51        |        |
| Mallian Addison COMMEDIAN DISTRICT  | DEDT //0/                                      |                   |     |           |                      | _     | м<br>1 1               | М         | / D   | 1 ( | D /          | Υ ,   | o ŏ s     | a Y    |
| Mailing Address COMMERCIAL BILLING<br>PO BOX 121124   | DEPT 1124                                      |                   |     |           |                      |       | 1 !                    |           |       |     |              |       | . 0 0 3   |        |
| •   |  | Code<br>5312-1124 |     |           |                      |       | Amou                   | nt o      | f Eac | h [ | Disburs      | emer  | nt this I | Period |
| Purpose of Disbursement Car Rental  |  |                   |     |           | -                    |       | L.                     |           |       |     |              | 1     | 27.86     | 3      |
| Candidate Name  |  |                   | Ca  | ate       | gory/                |       |                        |           |       |     |              |       |           |        |
|   |  |                   |     |           | pe ,                 |       |                        |           |       |     |              |       |           |        |
| Office Sought: House Disburse Senate  | ment For:                                      | Conoral           |     |           |                      |       |                        |           |       |     |              |       |           |        |
| President   | Primary Other (specify)                        | _ General ▼       |     |           |                      |       |                        |           |       |     |              |       |           |        |
| State: District:  | , (1 ),  | •                 |     |           |                      |       |                        |           |       |     |              |       |           |        |
| Full Name (Last, First, Middle Initial)   |  |                   |     |           |                      |       |                        |           |       |     | SB21         | B-3   | 52        |        |
| NICOLA HESKETT  |  |                   |     |           |                      |       | Date o                 | of D<br>м |       |     |              | v · \ | / · V ·   | V      |
| Mailing Address 3610 GILLHAM ROAD   |  |                   |     |           |                      |       | 1 1                    | IVI       |       | 1 ( | 3 /          | 2     | o ŏ s     | 9 '    |
|   |  | Code<br>1111      |     |           |                      |       | Amou                   | nt o      | f Eac | h [ | Disburs      | emer  | nt this I | Period |
| Purpose of Disbursement   |  | ····              | _   | _         | -                    |       |                        |           |       |     |              | 2     | 244.78    | 3      |
| Travel Expense  |  |                   | L   |           |                      |       |                        |           |       |     |              |       |           |        |
| Candidate Name  |  |                   |     |           | gory/<br>pe          |       |                        |           |       |     |              |       |           |        |
|   | ment For:                                      | Concret           |     |           |                      |       |                        |           |       |     |              |       |           |        |
| Senate   President  | Primary Other (specify)                        | _ General ▼       |     |           |                      |       |                        |           |       |     |              |       |           |        |
| State: District:  | - ()/  | *                 |     |           |                      |       |                        |           |       |     |              |       |           |        |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                   |     |           |                      |       |                        |           |       |     |              | 13    | 00.60     |        |
| 3 (1)   |  |                   |     | _         |                      |       |                        |           |       |     |              |       |           |        |

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| SCHEDULE B (FEC Form 3X)  | Use separat                           | te schedule(s)    | e(s) FOR LINE NUMBER: P |   | PA            | GE               | 19 /  | 37              |      |              |      |          |     |           |
|---|---------------------------------------|-------------------|-------------------------|---|---------------|------------------|-------|-----------------|------|--------------|------|----------|-----|-----------|
| ITEMIZED DISBURSEMENTS  | for each cat                          |                   |                         | _ | 21b<br>27     | 22<br>28a        |       | 23<br>28b       |      | 24<br>28c    |      | 25<br>29 |     | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |                                       |                   |                         |   |               |                  |       |                 |      |              |      |          | 3   |           |
| NAME OF COMMITTEE (In Full)   |                                       |                   |                         |   |               |                  |       |                 |      |              |      |          |     |           |
| DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OF                             | FFSET ACC         | 1UC                     | N | Γ             |                  |       |                 |      |              |      |          |     |           |
| Full Name (Last, First, Middle Initial) HYATT REGENCY HOTEL   |                                       |                   |                         |   |               |                  |       | on ID<br>isburs |      | SB21E<br>ent | 3-35 | 53       |     |           |
| Mailing Address 1800 EAST PUTNAM AV   | ENUE                                  |                   |                         |   |               | 1 <sup>M</sup> 1 | М     | / D             | 1 3  | / Y          | ž    | o ŏ s    | e Y |           |
| ,   |                                       | Zip Code<br>06870 |                         |   |               | Amou             | ınt o | f Each          | n Di | sburse       | -    |          | -   | d         |
| Purpose of Disbursement<br>Lodging & Catering   |                                       |                   |                         |   |               |                  |       |                 |      |              | 18   | 49.33    | 3   |           |
| Candidate Name  |                                       |                   |                         |   | egory/<br>/pe |                  |       |                 |      |              |      |          |     |           |
| Office Sought: House Disburse Senate President  | ment For:<br>Primary<br>Other (specif | General<br>y) ▼   |                         |   |               |                  |       |                 |      |              |      |          |     |           |
| State: District:  |                                       |                   |                         |   |               |                  |       |                 |      |              |      |          |     |           |
| Full Name (Last, First, Middle Initial) GREG MAYS   |                                       |                   |                         |   |               | Date             | of D  | isburs          | em   |              |      |          | _   |           |
| Mailing Address PO BOX 25153  |                                       |                   |                         |   |               | 1 1              | М     | / D             | 1 3  | / Y          | ž    | o ŏ s    | e Y |           |
| •   |                                       | Zip Code<br>20007 |                         |   |               | Amou             | ınt o | f Each          | n Di | sburse       | -    |          |     | d         |
| Purpose of Disbursement<br>Travel Expense   |                                       |                   | Г                       | 0 |               | L.               | 0     | _               |      |              | 3    | 97.34    | 1   |           |
| Candidate Name  |                                       |                   |                         |   | egory/<br>/pe |                  |       |                 |      |              |      |          |     |           |
| Office Sought: House Disburser Senate President State: District:  | ment For:<br>Primary<br>Other (specif | General<br>y) ▼   |                         |   |               |                  |       |                 |      |              |      |          |     |           |
| Full Name (Last, First, Middle Initial)   |                                       |                   |                         |   |               | Trans            | acti  | on ID           | : 5  | SB21E        | 3-35 | 55       |     |           |
| ANDREA MOKROS   |                                       |                   |                         |   |               |                  | _     | isburs          | _    |              |      | -        |     |           |
| Mailing Address 2922 ALDRICH AVENUE   | S, #515                               |                   |                         |   |               | 1 1              | М     | / D             | 1 3  | ] / [        | ž    | 0 0 9    | )   |           |
| •   |                                       | Zip Code<br>55408 |                         |   |               | Amou             | ınt o | f Each          | n Di | sburse       | -    |          |     | d         |
| Purpose of Disbursement<br>Travel Expense   |                                       |                   |                         | U | -             | L.               | -     | -               |      |              |      | 97.00    | )   |           |
| Candidate Name  |                                       |                   |                         |   | egory/<br>/pe |                  |       |                 |      |              |      |          |     |           |
| Office Sought: House Senate President State: District:  | ment For:<br>Primary<br>Other (specif | General<br>y) ▼   |                         |   |               |                  |       |                 |      |              |      |          |     |           |
| SUBTOTAL of Disbursements This Page (optional)  |                                       |                   |                         |   | . •           |                  |       |                 |      |              | 234  | 13.67    | 7   |           |
| TOTAL This Period (last page this line number only)   |                                       |                   |                         |   | •             |                  |       |                 |      |              |      |          |     |           |

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| ago# 10000011000  |   |                   |  |
|---|---|-------------------|--|
| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the | (check only       |  |
|   | Detailed Summary Page                             | X 21b 27          | 22 23 24 25 26<br>28a 28b 28c 29 30b           |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                   |  |
| NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFSET ACC                                 | OUNT              |  |
| Full Name (Last, First, Middle Initial) GERALD PARADISE   |   |                   | Transaction ID: SB21B-356 Date of Disbursement |
| Mailing Address PO BOX 691  |   |                   | 111  |
| ,   | State Zip Code<br>NY 14052                        |                   | Amount of Each Disbursement this Period        |
| Purpose of Disbursement Travel Expense  |   | _ ` `             | 448.20   |
| Candidate Name  |   | Category/<br>Type |  |
| Senate President  | ment For: Primary General Other (specify)         |                   |  |
| State: District: Full Name (Last, First, Middle Initial)  |   |                   |  |
| CHARLA BAILEY   |   |                   | Transaction ID: SB21B-360 Date of Disbursement |
| Mailing Address 713 N. WALNUT STREE   | Т   |                   | 111  |
| ,   | State Zip Code<br>AR 72114                        |                   | Amount of Each Disbursement this Period        |
| Purpose of Disbursement Travel & Subsistence Expense Reimb  |   |                   | 248.00   |
| Candidate Name  |   | Category/<br>Type |  |
| Senate President  | ment For: Primary General Other (specify)         |                   |  |
| State: District: Full Name (Last, First, Middle Initial)  |   |                   |  |
| JESSICA BLAKEMORE   |   |                   | Transaction ID: SB21B-361 Date of Disbursement |
| Mailing Address 2000 N STREET, NW APT. 701  |   |                   | 1 1 1 D 1 3 Y 2 0 0 9 Y                        |
|   | State Zip Code<br>DC 20036                        |                   | Amount of Each Disbursement this Period        |
| Purpose of Disbursement<br>Travel Expense   |   | 0 0               | 280.50   |
| Candidate Name  |   | Category/<br>Type |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)         |                   |  |
| State: District:  | топ (броспу) ▼                                    |                   |  |
| SUBTOTAL of Disbursements This Page (optional) .  |   | <b>&gt;</b>       | 976.70   |

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

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                       | FOR LINE I         | NUMBER: PAGE 21/37   |
|---|--|--------------------|--|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page | (check only 21b 27 | one) 22 23 24 25 26 28a 28b 28c 29 30  |
| Any Information copied from such Reports and Stater or for commercial purposes, other than using the name |  |                    |  |
| NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE  |  |                    |  |
| Full Name (Last, First, Middle Initial)   |  |                    | Transaction ID: SB21B-362  |
| SHASTI CONRAD   |  |                    | Date of Disbursement   |
| Mailing Address 14731 ASH WAY, UNIT   | A  |                    | $ \begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix}  \begin{bmatrix} D & 1 & 3 \\ 0 & 1 & 3 \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$   |
| City<br>LYNWOOD   | State Zip Code<br>WA 98087                     |                    | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   |  |                    | 359.00   |
| Travel Expense Candidate Name   |  | Category/<br>Type  |  |
| Office Sought: House Disburs Senate President State: District:  | ement For:  Primary General  Other (specify)   |                    |  |
| Full Name (Last, First, Middle Initial)   |  |                    | Transaction ID: SB21B-363  |
| ELIZABETH D'AUNNO   |  |                    | Date of Disbursement   |
| Mailing Address 15 WOODLAND HEIGH   | TS NE  |                    | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $  |
| City<br>IOWA CITY   | State Zip Code IA 52240                        |                    | Amount of Each Disbursement this Period  |
| Purpose of Disbursement Travel Expense  |  |                    | 269.50   |
| Candidate Name  |  | Category/<br>Type  |  |
| Senate President  | ement For: Primary General Other (specify)     |                    |  |
| State: District: Full Name (Last, First, Middle Initial)  |  |                    | Transaction ID: SB21B-364  |
| ELIZABETH D'AUNNO   |  |                    | Date of Disbursement   |
| Mailing Address 15 WOODLAND HEIGH   | TS NE  |                    | $\begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}M\\1\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\1\end{smallmatrix}} \begin{bmatrix}D\\3\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}Y\\2\end{smallmatrix}} \begin{bmatrix}Y\\2\end{smallmatrix} \begin{bmatrix}Y\\0\end{smallmatrix} \\0\end{smallmatrix} \begin{bmatrix}Y\\3\end{smallmatrix}$ |
| City<br>IOWA CITY   | State Zip Code IA 52240                        |                    | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   |  | · · ·              | 469.75   |
| Travel Expense Candidate Name   |  | Category/<br>Type  |  |
| Office Sought: House Disburs Senate President   | ement For: Primary General Other (specify)     | 1 урс              |  |
| State: District:  |  |                    |  |
| SUBTOTAL of Disbursements This Page (optional)  |  |                    | 1098.25  |

|        | CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS   | Use separate schedule(s for each category of the Detailed Summary Page | FOR LINE (check only X 21b 27 |   |
|--------|--|--|-------------------------------|---|
|        | y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE | e and address of any politica  | ed by any person fo           | or the purpose of soliciting contributions  |
|        | Full Name (Last, First, Middle Initial) IKE EMEJURU  |  |                               | Transaction ID: SB21B-365 Date of Disbursement  M M M / D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
|        | Mailing Address 3217 SACRAMENTO DE City VIRGINIA BEACH   | State Zip Code VA 23456  |                               | Amount of Each Disbursement this Period   |
|        | Purpose of Disbursement Travel Expense Candidate Name  | VA 23436   | Category/                     | 210.00  |
|        | Office Sought: House Disburse Senate President State: District:  | ement For: Primary General Other (specify)                             | Туре                          |   |
| <br>B. | Full Name (Last, First, Middle Initial) JONATHAN FELDMAN   |  |                               | Transaction ID: SB21B-366 Date of Disbursement  |
|        | Mailing Address 1610 16TH STREET, NV   | V #508   |                               | 111   |
|        | City<br>WASHINGTON   | State Zip Code DC 20009  |                               | Amount of Each Disbursement this Period   |
|        | Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  |  | Category/                     | 229.50  |
|        | Office Sought: House Disburse Senate President State: District:  | ement For: Primary General Other (specify)                             | Туре                          |   |
|        | Full Name (Last, First, Middle Initial) JEFFREY GULKO  |  |                               | Transaction ID: SB21B-367 Date of Disbursement  |
|        | Mailing Address 550 LIBERTY STREET,  | UNIT #1602   |                               | 111 13 / 2009   |
|        | City<br>BRAINTREE  | State Zip Code<br>MA 02184   |                               | Amount of Each Disbursement this Period   |
|        | Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  |  | Category/                     | 248.00  |
|        | Office Sought: House Disburse  | ement For:   | Туре                          |   |
|        | Senate President State: District:  | Primary General Other (specify) ▼                                      |                               |   |

C.

| SCHEDULE B (FEC Form 3X)  |   | 1                    |  |
|---|---|----------------------|--|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | FOR LINE (check only |  |
| II EMIZED DISBURSEMENTS   | Detailed Summary Page                             | X 21b 27             | 22 23 24 25 26<br>28a 28b 28c 29 30b           |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                      |  |
| NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFSET ACC                                 | OUNT                 |  |
| Full Name (Last, First, Middle Initial) JEFFREY KIERNAN   |   |                      | Transaction ID: SB21B-368 Date of Disbursement |
| Mailing Address 533 HOMER STREET  |   |                      | 1 1 M M M M M M M M M M M M M M M M M M        |
| •   | State Zip Code CA 90266                           |                      | Amount of Each Disbursement this Period        |
| Purpose of Disbursement Travel Expense  |   |                      | 476.35   |
| Candidate Name  |   | Category/<br>Type    |  |
| Senate President  | ment For: Primary General Other (specify)         |                      |  |
| State: District:  |   |                      |  |
| Full Name (Last, First, Middle Initial) ASHLEY LAATZ  |   |                      | Transaction ID: SB21B-369 Date of Disbursement |
| Mailing Address 1105 EAST CAPITOL ST  | REET, SE  |                      | 111  |
| •   | State Zip Code<br>DC 20003                        |                      | Amount of Each Disbursement this Period        |
| Purpose of Disbursement Travel & Subsistence Expense Reimb  |   |                      | 229.50   |
| Candidate Name  |   | Category/<br>Type    |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)         |                      |  |
| State: District:  |   |                      |  |
| Full Name (Last, First, Middle Initial) MEREDITH MANGAS   |   |                      | Transaction ID: SB21B-370 Date of Disbursement |
| Mailing Address 4603 SUTTON OAKS DF   | RIVE  |                      | 1 1 M M M M M M M M M M M M M M M M M M        |
|   | State Zip Code<br>VA 20151                        |                      | Amount of Each Disbursement this Period        |
| Purpose of Disbursement<br>Travel & Subsistence Expense Reimb   |   |                      | 390.50   |
| Candidate Name  |   | Category/<br>Type    |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)         |                      |  |
| State: District:  | · · · · · · · · · · · · · · · · · · ·             |                      |  |
| SURTOTAL of Dishursements This Page (ontional)  |   |                      | 1096.35  |

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

FOR LINE NUMBER: PAGE 24/37 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-371 PATRICK MORRIS Date of Disbursement 13 1 1 2009 Mailing Address 5024 WESTPATH TERRACE City State Zip Code Amount of Each Disbursement this Period **BETHESDA** MD 20816 453.23 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-372 SARAH MOSS Date of Disbursement 13 2009 Mailing Address 550 E. 12TH AVENUE #501 City State Zip Code Amount of Each Disbursement this Period DÉNVER 80201 CO 445.96 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-373 SEAMUS PERRY Date of Disbursement 2009 Mailing Address 1085 SANTA PAULA City State Zip Code Amount of Each Disbursement this Period LOS OSOS CA 93402 248.50 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 1147.69 SUBTOTAL of Disbursements This Page (optional) ...  $\triangleright$ 

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

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

FOR LINE NUMBER: PAGE 25/37 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-374 **GLEN RYNIEWSKI** Date of Disbursement 13 1 1 2009 Mailing Address 6104 W. HENDERSON City State Zip Code Amount of Each Disbursement this Period **CHICAGO** 60634 IL 249.50 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-376 KATHLEEN SHERWIN Date of Disbursement 13 2009 Mailing Address 11 WAVERLY PLACE, PENTHOUSE D City State Zip Code Amount of Each Disbursement this Period NÉW YORK 10003 NY 427.81 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-392 WHITE HOUSE AIRLIFT OPERATIONS Date of Disbursement 2009 Mailing Address 1600 Pennsylvania Avenue, NW EEOB ROOM #25 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20502 511.62 Purpose of Disbursement White House Airlift Helo Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 1188.93 SUBTOTAL of Disbursements This Page (optional) ...  $\triangleright$ 

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

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                       | FOR LINE I         |   |
|---|--|--------------------|---|
| TEMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page | (check only 21b 27 | 22 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  | by any person fo   | or the purpose of soliciting contributions  |
| NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFSET ACC                              | OUNT               |   |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS                                    |  |                    | Transaction ID: SB21B-393 Date of Disbursement  |
| Mailing Address 1600 Pennsylvania Aven<br>EEOB ROOM #25   | ue, NW   |                    | 111 D 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|   | State Zip Code<br>DC 20502                     |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>White House Airlift Airfare  |  |                    | 11843.80  |
| Candidate Name  |  | Category/<br>Type  |   |
| Senate President  | ment For: Primary General Other (specify)      |                    |   |
| State: District:  Full Name (Last, First, Middle Initial)  WHITE HOUSE AIRLIFT OPERATIONS                 |  |                    | Transaction ID: SB21B-394 Date of Disbursement  |
| Mailing Address 1600 Pennsylvania Aven  | ue, NW   |                    | $ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & 1 & 3 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$ |
| ,   | State Zip Code<br>DC 20502                     |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement White House Airlift In-flight Services  |  |                    | 81.53   |
| Candidate Name  |  | Category/<br>Type  |   |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)      |                    |   |
| State: District:  |  |                    |   |
| Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA  |  |                    | Transaction ID: SB21B-438 Date of Disbursement  |
| Mailing Address REGIONAL CENTER, VA P.O. BOX 27025  | A2-125-04-01                                   |                    | 11 M M / D D / Y Y Y O O 9 Y  |
| City  | State Zip Code<br>VA 23261-7025                |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>Bank Charges   |  |                    | 76.65   |
| Candidate Name  |  | Category/<br>Type  |   |
| Senate President  | ment For: Primary General Other (specify)      |                    |   |
| State: District:  |  |                    |   |
| SURTOTAL of Disbursements This Page (ontional)  |  |                    | 12001.98  |

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C.

| SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS                                   | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE N<br>(check only |  |
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| Any Information copied from such Reports and Staten                              | nents may not be sold or used   | by any person fo          | 28a 28b 28c 29 30b  r the purpose of soliciting contributions  |
| r for commercial purposes, other than using the nam                              | e and address of any political  | committee to soli         | cit contributions from such committee  |
| NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE                       | TRAVEL OFFSET ACCO  | TNUC                      |  |
| Full Name (Last, First, Middle Initial)  |   |                           | Transaction ID: SB21B-406  |
| WHITE HOUSE AIRLIFT OPERATIONS   |   |                           | Date of Disbursement   |
| Mailing Address 1600 Pennsylvania Aver<br>EEOB ROOM #25                          |   |                           | 111  |
| City<br>WASHINGTON   | State Zip Code DC 20502   |                           | Amount of Each Disbursement this Period  |
| Purpose of Disbursement White House Airlift Helo                                 |   | •                         | 511.62   |
| Candidate Name   |   | Category/<br>Type         |  |
| Office Sought:    House   Disburse     Senate     President     State: District: | ement For: Primary General Other (specify)                              | No.                       |  |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS           |   |                           | Transaction ID: SB21B-407 Date of Disbursement   |
| Mailing Address 1600 Pennsylvania Aver<br>EEOB ROOM #25                          | ue, NW  |                           | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ ' \ \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ \ ' \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Y & Q \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$ |
| City WASHINGTON  | State Zip Code DC 20502   |                           | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>White House Airlift Airfare                           |   |                           | 15884.01   |
| Candidate Name   |   | Category/<br>Type         |  |
| Office Sought:    House   Disburse     Senate     President     State: District: | ement For: Primary General Other (specify)                              |                           |  |
| Full Name (Last, First, Middle Initial)  |   |                           | Transaction ID: SB21B-408  |
| WHITE HOUSE AIRLIFT OPERATIONS   |   |                           | Date of Disbursement   |
| Mailing Address 1600 Pennsylvania Aven<br>EEOB ROOM #25                          | ue, NW  |                           | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $                |
| City<br>WASHINGTON   | State Zip Code DC 20502   |                           | Amount of Each Disbursement this Period  |
| Purpose of Disbursement White House Airlift In-flight Services                   |   |                           | 58.51  |
| Candidate Name   |   | Category/<br>Type         |  |
| Office Sought:  Senate President State:  Disburse  Senate President              | ement For: Primary General Other (specify)                              |                           |  |
| SUBTOTAL of Disbursements This Page (optional)                                   |   | <b>b</b>                  | 16454.14   |
| OTAL This Period (last page this line number only)                               |   |                           |  |
| 6AN026   |   |                           | FEC Schedule B ( Form 3X) (Revised 02/2  |

C.

| SCHEDULE B (FEC Form 3X)   | Lles separate sehedula(s)   | FOR LINE          | NUMBER: PAGE 28/37  |
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| ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the Detailed Summary Page | (check only 21b   | one)<br>22 23 24 25 26  |
| Any Information copied from such Reports and Staten                    | pents may not be sold or used   | by any person for | 28a 28b 28c 29 30b  |
| or for commercial purposes, other than using the nam                   |   |                   |   |
| NAME OF COMMITTEE (In Full)  | TD 4 / El 0 = 5 = 5 + 6 0   | O                 |   |
| DEMOCRATIC NATIONAL COMMITTEE -  | TRAVEL OFFSET ACC   | OUNT              |   |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS |   |                   | Transaction ID: SB21B-409 Date of Disbursement  |
| Mailing Address 1600 Pennsylvania Aver<br>EEOB ROOM #25                |   |                   | 111   |
| City<br>WASHINGTON   | State Zip Code DC 20502   |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement White House Airlift Airfare                    |   | • •               | 20192.62  |
| Candidate Name   |   | Category/<br>Type |   |
| Senate President   | ement For: Primary General Other (specify)                              |                   |   |
| State: District:  Full Name (Last, First, Middle Initial)              |   |                   | Transaction ID. CD01D 410   |
| WHITE HOUSE AIRLIFT OPERATIONS   |   |                   | Transaction ID: SB21B-410 Date of Disbursement  |
| Mailing Address 1600 Pennsylvania Aven<br>EEOB ROOM #25                | ue, NW  |                   | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & T \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $ |
| City<br>WASHINGTON   | State Zip Code DC 20502   |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement White House Airlift In-flight Services         |   |                   | 113.08  |
| Candidate Name   |   | Category/<br>Type |   |
| Senate President   | ement For: Primary General Other (specify)                              |                   |   |
| State: District:   |   |                   |   |
| Full Name (Last, First, Middle Initial) BRADLEY BECNEL                 |   |                   | Transaction ID: SB21B-411 Date of Disbursement  |
| Mailing Address 840 TCHOUPITOULAS                                      | <del>‡</del> 224  |                   | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $ |
| City<br>NEW ORLEANS  | State Zip Code<br>LA 70130  |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Travel Expense                                 |   |                   | 38.72   |
| Candidate Name   |   | Category/<br>Type |   |
| Office Sought: House Disburse Senate President                         | ement For: Primary General Other (specify)                              | . 100             |   |
| State: District:   |   |                   |   |
| SUBTOTAL of Disbursements This Page (optional)                         |   |                   | 20344.42  |

C.

| SCHEDULE B (FEC Form 3X)  |   | FOR LINE    | NUMBER: PAGE 29/37  |
|---|---|-------------|---|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | (check only | one)  |
|   | Detailed Summary Page                             | X 21b 27    | 22 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |             |   |
| NAME OF COMMITTEE (In Full)   | and address of any pointed                        |             | 100 00 11 11 10 10 10 10 10 10 10 10 10   |
| DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFSET ACC                                 | OUNT        |   |
| Full Name (Last, First, Middle Initial) ASHLEY LAATZ  |   |             | Transaction ID: SB21B-412   |
|   |   |             | Date of Disbursement  1 1 7 2 0 0 9   |
| Mailing Address 1105 EAST CAPITOL ST  | REET, SE  |             | 11 17 2009  |
| •   | State Zip Code<br>DC 20003                        |             | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |   |             | 49.58   |
| Travel Expense Candidate Name   |   | Category/   |   |
| Office Sought: House Disburse   | ment For:   | Туре        |   |
| Senate  | Primary General                                   |             |   |
| President State: District:  | Other (specify)                                   |             |   |
| Full Name (Last, First, Middle Initial)   |   |             | Transaction ID: SB21B-413   |
| BEN LENET   |   |             | Date of Disbursement  |
| Mailing Address 2606 N. RACINE AVENU<br>GARDEN UNIT   | JE  |             | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $ |
| •   | State Zip Code<br>IL 60614                        |             | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |   |             | 8.27  |
| Travel Expense Candidate Name   |   | Category/   |   |
|   |   | Type        |   |
| Office Sought: House Disburse Senate  | ment For: Primary General                         |             |   |
| President State: District:  | Other (specify) ▼                                 |             |   |
| Full Name (Last, First, Middle Initial)   |   |             | Transaction ID: SB21B-414   |
| BRIAN MCPARTLIN   |   |             | Date of Disbursement  |
| Mailing Address 1 E. LONNQUIST BLVD.  |   |             | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$  |
|   | State Zip Code<br>IL 60056                        |             | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |   |             | 15.14   |
| Travel Expense Candidate Name   |   | Category/   |   |
|   |   | Туре        |   |
| Office Sought: House Disburse Senate  | ment For:  Primary General                        |             |   |
| President State: District:  | Other (specify)                                   |             |   |
| State. DISTITUTE.   |   |             |   |
| SUBTOTAL of Disbursements This Page (optional)  |   |             | 72.99   |

C.

| SCHEDULE B (FEC Form 3X)                                 |  | 1                    |  |
|--|--|----------------------|--|
| •  | Use separate schedule(s)                       | FOR LINE (check only | NUMBER: PAGE 30 / 37 (one)                     |
| ITEMIZED DISBURSEMENTS                                   | for each category of the Detailed Summary Page | X 21b                | 22 23 24 25 26                                 |
| Any Information copied from such Reports and Statem      | ents may not be sold or uses                   | 1 by any person f    | 28a 28b 28c 29 30b                             |
| or for commercial purposes, other than using the name    |  |                      |  |
| NAME OF COMMITTEE (In Full)                              |  |                      |  |
| DEMOCRATIC NATIONAL COMMITTEE -                          | IHAVEL OFFSET ACC                              | OUNT                 |  |
| Full Name (Last, First, Middle Initial) TOLLEF BIGGS     |  |                      | Transaction ID: SB21B-428                      |
| TOLLEF BIGGS   |  |                      | Date of Disbursement                           |
| Mailing Address 320 WASHINGTON AVE                       | NUE, #1B                                       |                      | 111 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|  | State Zip Code<br>NY 11205                     |                      | Amount of Each Disbursement this Period        |
| Purpose of Disbursement                                  |  | ~ ~                  | -585.15  |
| Travel Expense Candidate Name                            |  | Category/            |  |
|  |  | Туре                 |  |
| Office Sought: House Disburse Senate                     | ment For:  Primary General                     |                      |  |
| President  | Other (specify)                                |                      |  |
| State: District: Full Name (Last, First, Middle Initial) |  |                      |  |
| JILLIAN DOODY  |  |                      | Transaction ID: SB21B-415 Date of Disbursement |
| Mailing Address 4115 11TH PLACE, N                       |  |                      | 11 1 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y       |
| THE HOLE, IN   |  |                      |  |
| •  | State Zip Code<br>VA 22201                     |                      | Amount of Each Disbursement this Period        |
| Purpose of Disbursement                                  |  | • •                  | 598.50   |
| Travel Expense Candidate Name                            |  | Category/            |  |
|  |  | Type                 |  |
| Office Sought: House Disburse                            | ment For:  Primary General                     |                      |  |
| President  | Other (specify)                                |                      |  |
| State: District:   |  |                      |  |
| Full Name (Last, First, Middle Initial) RYAN HUTCHERSON  |  |                      | Transaction ID: SB21B-416 Date of Disbursement |
| Mailing Address 4040 8TH STREET, NW                      | # <i>1</i>                                     |                      | 11 1 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y       |
|  |  |                      |  |
|  | State Zip Code<br>DC 20011                     |                      | Amount of Each Disbursement this Period        |
| Purpose of Disbursement Travel Expense                   |  | v v                  | 346.50   |
| Candidate Name   |  | Category/            |  |
| Office Sought: House Disburse                            | ment For:                                      | Туре                 |  |
| Senate   | Primary General                                |                      |  |
| President State: District:                               | Other (specify)                                |                      |  |
| ciato.   |  |                      |  |
| SUBTOTAL of Disbursements This Page (optional) .         |  |                      | 359.85   |

C.

| SCHEDULE B (FEC Form 3X)  |   | FOR LINE          | ENUMBER: PAGE 31/37   |  |  |  |
|---|---|-------------------|---|--|--|--|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | (check only       | one)  |  |  |  |
| == ===================================  | Detailed Summary Page                             | X 21b 27          | 22 23 24 25 26<br>28a 28b 28c 29 30   |  |  |  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                   |   |  |  |  |
| NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFSET ACC                                 | OUNT              |   |  |  |  |
| Full Name (Last, First, Middle Initial)   |   |                   |   |  |  |  |
| JEFF TATE   |   |                   | Transaction ID: SB21B-417 Date of Disbursement  |  |  |  |
| Mailing Address 1216 7TH STREET, NW   | #101  |                   |   |  |  |  |
| •   | State Zip Code<br>DC 20001                        |                   | Amount of Each Disbursement this Period   |  |  |  |
| Purpose of Disbursement Travel & Subsistence Expense Reimb  |   |                   | 280.00  |  |  |  |
| Candidate Name  |   | Category/<br>Type |   |  |  |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)         |                   |   |  |  |  |
| State: District:  |   |                   |   |  |  |  |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS                                    |   |                   | Transaction ID: SB21B-418 Date of Disbursement  |  |  |  |
| Mailing Address 1600 Pennsylvania Aven EEOB ROOM #25  | ue, NW  |                   | $\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} \ / \ \begin{bmatrix} D & D & D \\ 1 & 9 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}^{Y}$      |  |  |  |
| ,   | State Zip Code<br>DC 20502                        |                   | Amount of Each Disbursement this Period   |  |  |  |
| Purpose of Disbursement White House Airlift In-flight Services  |   |                   | 102.99  |  |  |  |
| Candidate Name  |   | Category/<br>Type |   |  |  |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)         |                   |   |  |  |  |
| State: District:  |   |                   |   |  |  |  |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS                                    |   |                   | Transaction ID: SB21B-419 Date of Disbursement  |  |  |  |
| Mailing Address 1600 Pennsylvania Aven EEOB ROOM #25  | ue, NW  |                   | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$ |  |  |  |
| City  | State Zip Code<br>DC 20502                        |                   | Amount of Each Disbursement this Period   |  |  |  |
| Purpose of Disbursement<br>White House Airlift Airfare  |   |                   | 17268.50  |  |  |  |
| Candidate Name  |   | Category/<br>Type |   |  |  |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify) ▼       |                   |   |  |  |  |
| State: District:  | · · · · · · · · · · · · · · · · · · ·             |                   |   |  |  |  |
| SURTOTAL of Dichurcements This Page (optional)  |   |                   | 17651.49  |  |  |  |

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                          |             |             |          |           | NUMBER: PAGE 32/37 yone) |                   |            |                |  |
|---|---|-------------|-------------|----------|-----------|--------------------------|-------------------|------------|----------------|--|
| TEMIZED DISBURSEMENTS   | for each category of the<br>Detailed Summary Page |             | X           | -        | 22<br>28a | 23<br>28b                | 24<br>28c         | 25<br>29   | 26<br>30b      |  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |             |             |          |           |                          |                   |            |                |  |
| NAME OF COMMITTEE (In Full)   |   | ., poou. o. |             |          |           |                          |                   |            |                |  |
| DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFS                                       | ET ACCO     | UNT         |          |           |                          |                   |            |                |  |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS                                    |   |             |             |          |           | action IC                | D: SB21<br>sement | B-420      |                |  |
| Mailing Address 1600 Pennsylvania Avenu<br>EEOB ROOM #25  | ue, NW  |             |             |          | 1 1       | M / D                    | 19 /              | ŽOŎ        | 9 <sup>Y</sup> |  |
| City  | State Zip C                                       |             |             |          | Amou      | nt of Eac                | h Disburse        | ement this | s Period       |  |
| Purpose of Disbursement White House Airlift Helo  |   |             | v           |          |           |                          |                   | 511.6      | 62             |  |
| Candidate Name  |   |             | Cate<br>Typ |          |           |                          |                   |            |                |  |
| Office Sought: House Disburse Senate President  | ment For: Primary Other (specify)                 | General     |             |          |           |                          |                   |            |                |  |
| State: District:  |   |             |             |          |           |                          |                   |            |                |  |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS                                    |   |             |             |          | Date      | of Disburs               |                   |            | V              |  |
| Mailing Address 1600 Pennsylvania Avenu<br>EEOB ROOM #25  | ue, NW  |             |             |          | 1 1       | WI / D                   | 19 /              | ŽOŎ        | 9              |  |
| ,   | State Zip C<br>DC 205                             |             |             |          | Amou      | nt of Eac                | h Disburse        | ement this | Period         |  |
| Purpose of Disbursement White House Airlift In-flight Services  |   |             | ,           |          |           |                          |                   | 105.0      | 01             |  |
| Candidate Name  |   |             | Cate        |          |           |                          |                   |            |                |  |
| Office Sought: House Disburse Senate President  | ment For: Primary Other (specify)                 | General     |             |          |           |                          |                   |            |                |  |
| State: District: Full Name (Last, First, Middle Initial)  |   |             |             |          |           |                          |                   |            |                |  |
| WHITE HOUSE AIRLIFT OPERATIONS  |   |             |             |          | Date of   | of Disburs               |                   |            | V              |  |
| Mailing Address 1600 Pennsylvania Avenu<br>EEOB ROOM #25  | ue, NW  |             |             |          | 1 1       |                          | 19 /              | žoŏ        | 9              |  |
|   | State Zip C<br>DC 205                             |             |             |          | Amou      | nt of Eac                | h Disburse        |            |                |  |
| Purpose of Disbursement White House Airlift Airfare   |   |             | U           |          | L.        |                          |                   | 13664.6    | 66             |  |
| Candidate Name  |   |             | Cate        |          |           |                          |                   |            |                |  |
| Office Sought: House Disburse Senate President  | ment For: Primary Other (specify)                 | General     |             |          |           |                          |                   |            |                |  |
| State: District:  | Carior (Specify)                                  | •           |             |          |           |                          |                   |            |                |  |
| SUBTOTAL of Disbursements This Page (optional) .  |   | <u></u>     | <u></u>     | <u> </u> |           |                          |                   | 14281.2    | 29             |  |

C.

| SCHEDULE B (FEC Form 3X)   |   | FOR LINE          | NUMBER: PAGE 33/37   |
|--|---|-------------------|--|
| ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the | (check only       |  |
|  | Detailed Summary Page                             | 27                | 22 23 24 25 26<br>28a 28b 28c 29 30b   |
| Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam |   |                   |  |
| NAME OF COMMITTEE (In Full)  |   |                   |  |
| DEMOCRATIC NATIONAL COMMITTEE -  | TRAVEL OFFSET ACC                                 | OUNT              |  |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS                                   |   |                   | Transaction ID: SB21B-423 Date of Disbursement   |
| Mailing Address 1600 Pennsylvania Aven<br>EEOB ROOM #25  | ue, NW  |                   | 1 1 1 D Y 2 0 0 9 Y  |
| City<br>WASHINGTON   | State Zip Code DC 20502                           |                   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement White House Airlift Helo   |   |                   | 580.48   |
| Candidate Name   |   | Category/<br>Type |  |
| Office Sought: House Disburse Senate President State: District:  | ement For: Primary General Other (specify)        |                   |  |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS                                   |   |                   | Transaction ID: SB21B-424 Date of Disbursement   |
| Mailing Address 1600 Pennsylvania Aven<br>EEOB ROOM #25  | ue, NW  |                   | 111  |
| City<br>WASHINGTON   | State Zip Code DC 20502                           |                   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement White House Airlift In-flight Services   |   |                   | 126.66   |
| Candidate Name   |   | Category/<br>Type |  |
| Senate President   | ement For: Primary General Other (specify)        |                   |  |
| State: District: Full Name (Last, First, Middle Initial)   |   |                   |  |
| WHITE HOUSE AIRLIFT OPERATIONS   |   |                   | Transaction ID: SB21B-425 Date of Disbursement   |
| Mailing Address 1600 Pennsylvania Aven<br>EEOB ROOM #25  | ue, NW  |                   | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$ |
| City<br>WASHINGTON   | State Zip Code<br>DC 20502                        |                   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>White House Airlift Airfare   |   |                   | 16449.12   |
| Candidate Name   |   | Category/<br>Type |  |
| Office Sought: House Disburse Senate President   | ement For: Primary General Other (specify)        | 71-2              |  |
| State: District:   |   |                   |  |
| SUBTOTAL of Disbursements This Page (optional)   |   |                   | 17156.26   |

C.

| 29011 1000001 1001  |   |                   |  |
|---|---|-------------------|--|
| SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE I        |  |
|   |   | 27                | 28a 28b 28c 29 30b   |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                   |  |
| NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -   | TRAVEL OFFSET ACCO  | UNT               |  |
| Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS                                    |   |                   | Transaction ID: SB21B-426 Date of Disbursement   |
| Mailing Address 1600 Pennsylvania Aven<br>EEOB ROOM #25   | ue, NW  |                   | 111 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| •   | State Zip Code<br>DC 20502  |                   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement White House Airlift Helo  | [   |                   | 582.76   |
| Candidate Name  |   | Category/<br>Type |  |
| Office Sought: House Disburse Senate President State: District:   | ment For: Primary General Other (specify)                                     |                   |  |
| Full Name (Last, First, Middle Initial)   |   |                   | Transaction ID: CD01D 407  |
| DEPARTMENT OF TREASURY  |   |                   | Transaction ID: SB21B-427 Date of Disbursement   |
| Mailing Address P.O. BOX 27800  |   |                   | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 1 & 9 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Q & Q & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}$ |
| •   | State Zip Code DC 20038-7800  |                   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   |   | • •               | 41.68  |
| Travel - Expense Candidate Name   | l   | Category/<br>Type |  |
| Senate President  | ment For: Primary General Other (specify)                                     |                   |  |
| State: District:  |   |                   |  |
| Full Name (Last, First, Middle Initial) TOLLEF BIGGS  |   |                   | Transaction ID: SB21B-429 Date of Disbursement   |
| Mailing Address 320 WASHINGTON AVE  | NUE, #1B  |                   | 111 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|   | State Zip Code<br>NY 11205  |                   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>Travel Expense   |   |                   | 585.15   |
| Candidate Name  |   | Category/<br>Type |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)                                     |                   |  |
| State: District:  | - (-p <del>-11</del> )/ <b>▼</b>  |                   |  |
| SUBTOTAL of Disbursements This Page (optional) .  |   | <u></u>           | 1209.59  |

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

C.

| age# 10930314090   |   |   |
|--|---|---|
| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)    Y   21b  |
| Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam |   | ny person for the purpose of soliciting contributions   |
| NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE  | TRAVEL OFFSET ACCOUN  | IT  |
| Full Name (Last, First, Middle Initial) Jane Campbell Spencer  |   | Transaction ID: SB21B-430 Date of Disbursement  |
| Mailing Address 120 6TH STREET, SE   |   | 111 M / 20 / Y 2009 Y   |
| City<br>Washington   | State Zip Code<br>DC 20003  | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Travel Expense Candidate Name  | Ca  | 271.77<br>tegory/   |
|  | <b>_</b>  | Гуре  |
| Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY  Mailing Address P.O. BOX 27800           |   | Transaction ID: SB21B-431 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City<br>WASHINGTON   | State Zip Code DC 20038-7800  | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Travel - Expense Candidate Name  | <b>_</b>  | tegory/<br>Type   |
| Office Sought: House Disburse Senate President State: District:  | ement For:    Primary   General     Other (specify)   ▼                 | 7,700   |
| Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY   |   | Transaction ID: SB21B-432 Date of Disbursement  |
| Mailing Address P.O. BOX 27800   |   | 1 1 M   |
| City<br>WASHINGTON   | State         Zip Code           DC         20038-7800                  | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>Travel - Expense  |   | 688.23  |
| Candidate Name   |   | tegory/<br>Type   |
| Office Sought: House Disburse Senate President   | ement For:  Primary General  Other (specify)                            |   |
| State: District:   | •   |   |
| SUBTOTAL of Disbursements This Page (optional)   |   | 1506.00   |

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

В.

C.

## **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 36/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-433 DEPARTMENT OF TREASURY Date of Disbursement 20 1 1 2009 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 558.90 Purpose of Disbursement Travel - Expense Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-434 DEPARTMENT OF TREASURY Date of Disbursement 2 Ŏ 2009 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON 20038-7800 DC 1210.17 Purpose of Disbursement Travel - Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-435 DEPARTMENT OF TREASURY Date of Disbursement 20 2009 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 68.88 Purpose of Disbursement Travel - Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional) ...

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

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1837.95

В.

## **SCHEDULE B (FEC Form 3X)**

Senate

District:

President

FOR LINE NUMBER: PAGE 37/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-436 DEPARTMENT OF TREASURY Date of Disbursement **1**<sup>™</sup>1 20 2009 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 331.94 Purpose of Disbursement Travel - Expense Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-437 **TOLLEF BIGGS** Date of Disbursement 20 2009 Mailing Address 320 WASHINGTON AVENUE, #1B City State Zip Code Amount of Each Disbursement this Period **BROOKLYN** 11205 NY 650.00 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For:

General

| SUBTOTAL of Disbursements This Page (optional)        | <b>•</b> | 981.94    |
|---|----------|-----------|
| TOTAL This Device (José norse étic line avendes auth) | _        | 128196.02 |
| TOTAL This Period (last page this line number only)   |          | 120190.02 |

Primary

Other (specify)

State: