

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Mid-Atlantic Progressive Leadership Committee

Report Covering the Period: From: To:

28029953065

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2008"/>		<input type="text" value="498.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1367.14"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1735.00"/>	<input type="text" value="15737.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3102.14"/>	<input type="text" value="16235.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1726.68"/>	<input type="text" value="14860.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1375.46"/>	<input type="text" value="1375.46"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="-0-"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="-0-"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Mid-Atlantic Progressive Leadership Committee

Report Covering the Period: From: 10 / 16 / 2008 To: 11 / 24 / 2008

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

250.00

950.00

(ii) Unitemized.....

1485.00

14787.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1735.00

15737.00

(b) Political Party Committees.....

-0-

-0-

(c) Other Political Committees (such as PACs).....

-0-

-0-

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

1735.00

15737.00

12. Transfers From Affiliated/Other Party Committees.....

N/A

N/A

13. All Loans Received.....

-0-

-0-

14. Loan Repayments Received.....

N/A

N/A

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

-0-

-0-

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

N/A

N/A

17. Other Federal Receipts (Dividends, Interest, etc.).....

-0-

-0-

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

N/A

N/A

(b) Levin Funds (from Schedule H5).....

N/A

N/A

(c) Total Transfers (add 18(a) and 18(b))..

N/A

N/A

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1735.00

15737.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1735.00

15737.00

28039953066

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	N/A	N/A
(ii) Non-Federal Share	N/A	N/A
(b) Other Federal Operating Expenditures	1,626.68	1,147.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,626.68	1,147.52
22. Transfers to Affiliated/Other Party Committees	- 0 -	- 0 -
23. Contributions to Federal Candidates/Committees and Other Political Committees	- 0 -	- 0 -
24. Independent Expenditures (use Schedule E)	100.00	3,385.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	N/A	N/A
26. Loan Repayments Made	N/A	N/A
27. Loans Made	- 0 -	- 0 -
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	N/A	N/A
(b) Political Party Committees	N/A	N/A
(c) Other Political Committees (such as PACs)	N/A	N/A
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	- 0 -	- 0 -
29. Other Disbursements	- 0 -	- 0 -
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	N/A	N/A
(ii) "Levin" Share	N/A	N/A
(b) Federal Election Activity Paid Entirely With Federal Funds	N/A	N/A
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	N/A	N/A
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1,726.68	1,486.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,726.68	1,486.52

28039953067

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1,735.00	15,737.00
34. Total Contribution Refunds (from Line 28(d))	-0-	-0-
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1,735.00	15,737.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1,626.68	11,475.52
37. Offsets to Operating Expenditures (from Line 15, page 3)	-0-	-0-
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1,626.68	11,475.52

28039953068

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE / OF /	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Mid-Atlantic Progressive Leadership Committee

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

Mailing Address
7216 Rebecca Dr.

City *Alexandria* State *VA* Zip Code *22307*

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

Name of Employer *retired* Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 16 / 2008

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶ *250.00*

28039953069

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

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

FOR LINE NUMBER:
(check only one)

PAGE / OF 6

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

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

NAME OF COMMITTEE (In Full)

MfD-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A. *Smith, Wesley J.*

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name

petty cash

002

Category/
Type

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

100.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. *Smith, Wesley J.*

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name

lodging reimbursement

001

Category/
Type

Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

170.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. *Smith, Wesley J.*

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name

petty cash

001

Category/
Type

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional).....▶

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

28039953070

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A. *Smith, Wesley J.*

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

lodging reimbursement

Candidate Name

001

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

175.00

Full Name (Last, First, Middle Initial)

B. *Smith, Wesley J.*

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

lodging reimbursement

Candidate Name

001

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

235.00

Full Name (Last, First, Middle Initial)

C. *Smith, Wesley J.*

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

petty cash

Candidate Name

002

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

40.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

28039953071

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

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

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 6

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

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A. VA Department of Taxation

Mailing Address: P.O. Box 27264

City: Richmond VA Zip Code: 23261-7264

Purpose of Disbursement: state withholding payment

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 11/04/2008

Amount of Each Disbursement this Period: 12.00

Category/Type: 0.01

B. Smith, Wesley J.

Mailing Address: P.O. Box 19205

City: Alexandria VA Zip Code: 22320

Purpose of Disbursement: petty cash

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 11/06/2008

Amount of Each Disbursement this Period: 50.00

Category/Type: 0.02

C. Smith, Wesley J.

Mailing Address: P.O. Box 19205

City: Alexandria VA Zip Code: 22320

Purpose of Disbursement: lodging reimbursement

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 11/10/2008

Amount of Each Disbursement this Period: 160.00

Category/Type: 0.01

SUBTOTAL of Disbursements This Page (optional).....▶

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

28039953072

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

Use separate schedule(s) for each category of the Detailed Summary Page.	FOR LINE NUMBER: (check only one)						PAGE 9 OF 6				
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Mid-Atlantic Progressive Leadership Committee

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

Mailing Address *P.O. Box 19205*

City *Alexandria* State *VA* Zip Code *22320*

Purpose of Disbursement *petty cash*

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *1/1/08*

Amount of Each Disbursement this Period: *20.00*

Category/Type: *001*

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

Mailing Address *P.O. Box 19205*

City *Alexandria* State *VA* Zip Code *22320*

Purpose of Disbursement *petty cash*

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *1/1/08*

Amount of Each Disbursement this Period: *50.00*

Category/Type: *002*

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

Mailing Address *P.O. Box 1358*

City *Richmond* State *VA* Zip Code *23218-1358*

Purpose of Disbursement *state unemployment fund payment*

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *1/1/08*

Amount of Each Disbursement this Period: *268*

Category/Type: *001*

SUBTOTAL of Disbursements This Page (optional).....▶

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

28039953073

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 6

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

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A.

Smith, Wesley J.

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Salary

Candidate Name

001

Category/
Type

Date of Disbursement

11 / 19 / 2008

Amount of Each Disbursement this Period

155.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Smith, Wesley J.

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

lodging reimbursement

Candidate Name

001

Category/
Type

Date of Disbursement

11 / 17 / 2008

Amount of Each Disbursement this Period

145.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Smith, Wesley J.

Mailing Address

P.O. Box 19205

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

petty cash

Candidate Name

002

Category/
Type

Date of Disbursement

11 / 19 / 2008

Amount of Each Disbursement this Period

40.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

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

28039953074

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 6 OF 6
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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

NAME OF COMMITTEE (In Full)
Mid-Atlantic Progressive Leadership Committee

A. Full Name (Last, First, Middle Initial) <i>Smith, Wesley J.</i>		Date of Disbursement MM / DD / YYYY <i>11 / 24 / 2008</i>
Mailing Address <i>P.O. Box 19205</i>		Amount of Each Disbursement this Period <i>155.00</i>
City <i>Alexandria</i>	State <i>VA</i>	
Zip Code <i>22320</i>		Category/Type <i>001</i>
Purpose of Disbursement <i>lodging reimbursement</i>		
Candidate Name <i>[blank]</i>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <i>[blank]</i>	District: <i>[blank]</i>	

B. Full Name (Last, First, Middle Initial) <i>Smith, Wesley J.</i>		Date of Disbursement MM / DD / YYYY <i>11 / 24 / 2008</i>
Mailing Address <i>P.O. Box 19205</i>		Amount of Each Disbursement this Period <i>80.00</i>
City <i>Alexandria</i>	State <i>VA</i>	
Zip Code <i>22320</i>		Category/Type <i>002</i>
Purpose of Disbursement <i>petty cash</i>		
Candidate Name <i>[blank]</i>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <i>[blank]</i>	District: <i>[blank]</i>	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/Type
Purpose of Disbursement		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<i>[blank]</i>
TOTAL This Period (last page this line number only).....▶	<i>1619.68</i>

28039953075

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) <i>Mid-Atlantic Progressive Leadership Committee</i>	FEC IDENTIFICATION NUMBER ▼ C00300236
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee <i>Smith, Wesley J.</i>	Date 10 / 22 / 2008
Mailing Address <i>P.O. Box 19205</i>	Amount 60.00
City State Zip Code <i>Alexandria VA 22320</i>	

Purpose of Expenditure <i>Salary for organizing absence ballot program at DC universities</i>	Category/Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Barack Obama</i>	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	

Calendar Year-To-Date Per Election for Office Sought 334500	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
---	--

Full Name (Last, First, Middle Initial) of Payee <i>Smith, Wesley J.</i>	Date 10 / 30 / 2008
Mailing Address <i>P.O. Box 19205</i>	Amount 40.00
City State Zip Code <i>Alexandria VA 22320</i>	

Purpose of Expenditure <i>get-out-the-vote drive at Virginia universities</i>	Category/Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Barack Obama</i>	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	

Calendar Year-To-Date Per Election for Office Sought 338500	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
---	--

(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	-0-
(c) TOTAL Independent Expenditures	100.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature *[Signature]*

Date **12 / 04 / 2008**

28039953076

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>12/4/08</i>
<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JMP
PREPARER

12/11/08
DATE PREPARED

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