



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
IMPACT

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		19364.44
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	57935.68									
(c) Total Receipts (from Line 19) .....	41008.26	260125.39								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	98943.94	279489.83								
7. Total Disbursements (from Line 31) .....	28378.27	208924.16								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	70565.67	70565.67								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
IMPACT

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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) .....	0.00	32500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	32500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	41000.00	222500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	41000.00	255000.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	50.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	8.26	75.39
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)) .....	41008.26	260125.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	41008.26	260125.39

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3378.27	63674.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3378.27	63674.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	145000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	250.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28378.27	208924.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28378.27	208924.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	41000.00	255000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	41000.00	254750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3378.27	63674.16
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	50.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3378.27	63624.16

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 13</span>
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
IMPACT

<b>A.</b>	Full Name (Last, First, Middle Initial) American Federation of Teachers -COPE	Date of Receipt MM / DD / YYYY 12 / 09 / 2009
	Mailing Address 555 New Jersey Ave., NW	<b>Transaction ID:</b> C5642876
	City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00028860	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Anheuser-Busch PAC	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address 1401 I Street, NW Suite 200	<b>Transaction ID:</b> C5641908
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00034488	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Comcast Corporation PAC	Date of Receipt MM / DD / YYYY 12 / 01 / 2009
	Mailing Address 1701 JFK Boulevard	<b>Transaction ID:</b> C5633114
	City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00248716	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8500.00</b>
<b>TOTAL</b> 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: <span style="float: right;">PAGE 7 / 13</span>
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**IMPACT**

<b>A.</b>	Full Name (Last, First, Middle Initial) Comcast Corporation PAC		Date of Receipt
	Mailing Address 1701 JFK Boulevard		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19103
	FEC ID number of contributing federal political committee.		Transaction ID: C5643681
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		<input type="text" value="5000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Deloitte & Touche Federal PAC		Date of Receipt
	Mailing Address PO Box 365		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20044
	FEC ID number of contributing federal political committee.		Transaction ID: C5642872
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) International Assoc. of Fire Fighters PAC		Date of Receipt
	Mailing Address 1750 New York Ave., NW		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20006
	FEC ID number of contributing federal political committee.		Transaction ID: C5633113
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="12500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 8 / 13  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
IMPACT

**A.** Full Name (Last, First, Middle Initial)  
Lockheed Martin Employees' PAC

Mailing Address 1550 Crystal Drive  
Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 2 / 2 8 / 2 0 0 9

**Transaction ID:** C5647376

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 591 Redwood Hwy.  
Bldg. 4000

City Mill Valley State CA Zip Code 94941

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 2 / 1 8 / 2 0 0 9

**Transaction ID:** C5645250

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
NEA Fund for Children & Public Education

Mailing Address 1201 16th St., NW  
Suite 421

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 2 / 3 0 / 2 0 0 9

**Transaction ID:** C5647375

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

**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 / 13	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
IMPACT

A.

Full Name (Last, First, Middle Initial)  
Office & Professional Employees Intl Union

Mailing Address 1660 L St., NW  
Suite #801

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00007898

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 2 3 / 2 0 0 9

Transaction ID: C5647373

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	41000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
IMPACT

<p><b>A.</b> Full Name (Last, First, Middle Initial) 509 Madison Avenue Associates, LP</p> <p>Mailing Address c/o Kensico Properties 509 Madison Ave.</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Rent (Includes Utilities)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D324353</p> <p>Date of Disbursement 12 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 649.94</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Express EMPS</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D324355</p> <p>Date of Disbursement 12 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Ave. Suite 4800</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Professional Services-Legal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D324357</p> <p>Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 744.50</p> <p>001 Category/Type</p>

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

1419.44

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
IMPACT

A.	Full Name (Last, First, Middle Initial) TFS Consulting  Mailing Address 426 C St. NE  City Washington State DC Zip Code 20002  Purpose of Disbursement Consulting Service-Fundraising Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">003</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D324354 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">1 2</span> / <span style="border: 1px solid black; padding: 2px;">0 1</span> / <span style="border: 1px solid black; padding: 2px;">2 0 0 9</span>  Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span>  Not For Federal Candidate
B.	Full Name (Last, First, Middle Initial) Verdolino & Lowey, P.C.  Mailing Address 124 Washington St. Suite 101  City Foxboro State MA Zip Code 02035  Purpose of Disbursement Professional Services-Accounting Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D324358 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">1 2</span> / <span style="border: 1px solid black; padding: 2px;">1 7</span> / <span style="border: 1px solid black; padding: 2px;">2 0 0 9</span>  Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">897.88</span>
C.	Full Name (Last, First, Middle Initial) Verizon  Mailing Address P.O. Box 15124  City Albany State NY Zip Code 12212  Purpose of Disbursement Telephone Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D324356 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">1 2</span> / <span style="border: 1px solid black; padding: 2px;">0 7</span> / <span style="border: 1px solid black; padding: 2px;">2 0 0 9</span>  Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">60.95</span>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<span style="border: 1px solid black; padding: 5px; display: block;">1958.83</span>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<span style="border: 1px solid black; padding: 5px; display: block;">3378.27</span>

**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 12 / 13

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

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NAME OF COMMITTEE (In Full)  
IMPACT

<b>A.</b> Full Name (Last, First, Middle Initial) Martha Coakley for Senate Committee <hr/> Mailing Address 529 Main Street <hr/> City Charlestown State MA Zip Code 02129 <hr/> Purpose of Disbursement 2010 MA-S--Special Primary Debt Candidate Name Martha Coakley <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	Transaction ID: D324359 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5000.00
	Category/ Type 011

<b>B.</b> Full Name (Last, First, Middle Initial) Martha Coakley for Senate Committee <hr/> Mailing Address 529 Main Street <hr/> City Charlestown State MA Zip Code 02129 <hr/> Purpose of Disbursement 2010 MA-S--Special General Candidate Name Martha Coakley <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	Transaction ID: D324360 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5000.00
	Category/ Type 011

<b>C.</b> Full Name (Last, First, Middle Initial) Nevada State Democratic Party <hr/> Mailing Address 409 Horn St. <hr/> City Las Vegas State NV Zip Code 89107 <hr/> Purpose of Disbursement Contribution Candidate Name Nevada State Democratic Party <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324363 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5000.00
	Category/ Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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NAME OF COMMITTEE (In Full)  
IMPACT

A.	Full Name (Last, First, Middle Initial) Tim Bishop for Congress	Transaction ID: D324361 Date of Disbursement
	Mailing Address PO Box 437	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
	City Farmingville State NY Zip Code 11738	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 NY-H-01-Primary	<input type="text" value="5000.00"/>
	Candidate Name Timothy Bishop	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tim Bishop for Congress	Transaction ID: D324362 Date of Disbursement
	Mailing Address PO Box 437	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
	City Farmingville State NY Zip Code 11738	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 NY-H-01-General	<input type="text" value="5000.00"/>
	Candidate Name Timothy Bishop	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="25000.00"/>