

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

PROGRESSIVE CHOICES PAC

ADDRESS (number and street) P.O. BOX 58

Check if different than previously reported. (ACC) EVANSTON IL 60204

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00381806

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:
- |   |                                       |  |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on 11 07 2006 in the State of IL

5. Covering Period 10 19 2006 through 11 27 2006

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

Type or Print Name of Treasurer Karen Lennon

Signature of Treasurer Electronically Filed by Karen Lennon Date 12 01 2006

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

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
PROGRESSIVE CHOICES PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		24429.95
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	41586.90									
(c) Total Receipts (from Line 19) .....	2500.00	115250.41								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	44086.90	139680.36								
7. Total Disbursements (from Line 31) .....	24708.46	120301.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	19378.44	19378.44								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
PROGRESSIVE CHOICES PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

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	500.00	84350.41
(i) Itemized (use Schedule A) .....	0.00	3900.00
(ii) Unitemized .....	500.00	88250.41
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	2000.00	27000.00
(c) Other Political Committees (such as PACs) .....	2500.00	115250.41
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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	0.00
16. Refunds of Contributions Made 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)) .....	2500.00	115250.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2500.00	115250.41

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<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.....	46.23	9301.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	46.23	9301.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	23662.23	106000.00
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	0.00
(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	0.00
29. Other Disbursements.....	1000.00	5000.00
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))..	24708.46	120301.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	24708.46	120301.92

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	2500.00	115250.41
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2500.00	115250.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	46.23	9301.92
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	46.23	9301.92

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 16	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 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)  
**PROGRESSIVE CHOICES PAC**

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

Mailing Address 47 Tryon Farm Lane

City State Zip Code  
 Michigan City IN 46360

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

Name of Employer Occupation  
 Northern Trust Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 6 / 2 0 0 6

**Transaction ID: SA11A1.4802**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 16
	(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)  
PROGRESSIVE CHOICES PAC

**A.** Full Name (Last, First, Middle Initial)  
Brian Higgins for Congress

Mailing Address P.O. Box 28

City State Zip Code  
Buffalo NY 14220

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	7	/	2	0	0	6

Transaction ID: SA11C.4804

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2000.00

**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 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)  
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) <b>A. CALLAGHANFORCONGRESS.COMMITTEE</b>		<b>Transaction ID: SB23.4867</b> Date of Disbursement 11 / 01 / 2006
Mailing Address PO BOX 3002		Amount of Each Disbursement this Period 1000.00
City CHARLESTON	State WV	
Zip Code 25331	Category/Type	
Purpose of Disbursement Contribution		
Candidate Name MIKE O CALLAGHAN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 02		

Full Name (Last, First, Middle Initial) <b>B. CITIZENS FOR ALTMIRE</b>		<b>Transaction ID: SB23.4837</b> Date of Disbursement 10 / 25 / 2006
Mailing Address PO BOX 1776		Amount of Each Disbursement this Period 1000.00
City FREEDOM	State PA	
Zip Code 15042	Category/Type	
Purpose of Disbursement Contribution		
Candidate Name JASON ALTMIRE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 04		

Full Name (Last, First, Middle Initial) <b>C. COLEEN ROWLEY FOR CONGRESS</b>		<b>Transaction ID: SB23.4842</b> Date of Disbursement 10 / 25 / 2006
Mailing Address P.O. Box 241598		Amount of Each Disbursement this Period 1000.00
City Apple Valley	State MN	
Zip Code 55124	Category/Type	
Purpose of Disbursement Contribution		
Candidate Name COLEEN ROWLEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
PROGRESSIVE CHOICES PAC

**A.** Full Name (Last, First, Middle Initial)  
ELLEN SIMON FOR CONGRESS

Mailing Address PO BOX 20435

City SEDONA State AZ Zip Code 86341

Purpose of Disbursement  
Contribution

Candidate Name  
ELLEN SIMON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: AZ District: 01

**Transaction ID:** SB23.4844

Date of Disbursement

10 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF TAMMY DUCKWORTH

Mailing Address 416 W 22ND ST

City LOMBARD State IL Zip Code 60148

Purpose of Disbursement  
Contribution

Candidate Name  
L. TAMMY DUCKWORTH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

**Transaction ID:** SB23.4871

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

1000.00

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

Mailing Address PO BOX 1279

City HUDSON State NY Zip Code 12534

Purpose of Disbursement  
Contribution

Candidate Name  
KIRSTEN E GILLIBRAND

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

**Transaction ID:** SB23.4869

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 16

<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)  
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) <b>A. GOLDMARK FOR CONGRESS</b>		<b>Transaction ID: SB23.4839</b> Date of Disbursement
Mailing Address PO BOX 1512		<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="25"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City SPOKANE	State WA	Zip Code 99210
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name PETER JAMES GOLDMARK		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 05	

Full Name (Last, First, Middle Initial) <b>B. GRANT FOR CONGRESS</b>		<b>Transaction ID: SB23.4850</b> Date of Disbursement
Mailing Address P O BOX 489		<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="27"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City FRUITLAND	State ID	Zip Code 83619
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name LARRY L GRANT		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ID	District: 01	

Full Name (Last, First, Middle Initial) <b>C. JACK DAVIS FOR CONGRESS</b>		<b>Transaction ID: SB23.4860</b> Date of Disbursement
Mailing Address POST OFFICE BOX 2004		<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="27"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City AKRON	State NY	Zip Code 14001
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name JOHN R JR DAVIS		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 26	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)  
PROGRESSIVE CHOICES PAC

**A.** Full Name (Last, First, Middle Initial)  
JAY FAWCETT FOR CONGRESS 2006

Mailing Address PO Box 7124

City Colorado Springs State CO Zip Code 80933

Purpose of Disbursement  
Contribution

Candidate Name  
JAY FAWCETT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: CO District: 05

Transaction ID: SB23.4848

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
JOHN HALL FOR CONGRESS

Mailing Address PO Box 377

City Dover Plains State NY Zip Code 12522

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN JOSEPH HALL

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NY District: 19

Transaction ID: SB23.4858

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
JUDY FEDER FOR CONGRESS

Mailing Address 1514 HARDWOOD LANE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
Contribution

Candidate Name  
JUDITH FEDER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: VA District: 10

Transaction ID: SB23.4864

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) <b>A. KLEEB FOR CONGRESS</b>		<b>Transaction ID: SB23.4835</b> Date of Disbursement
Mailing Address PO Box 638		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City Kearney	State NE	Zip Code 68848
Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>	
Candidate Name SCOTT KLEEB	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE District: 03		

Full Name (Last, First, Middle Initial) <b>B. KLEIN FOR CONGRESS</b>		<b>Transaction ID: SB23.4870</b> Date of Disbursement
Mailing Address 21301 POWERLINE ROAD SUITE 204		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>
City BOCA RATON	State FL	Zip Code 33433
Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>	
Candidate Name RON KLEIN	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 22		

Full Name (Last, First, Middle Initial) <b>C. LAMPSON FOR CONGRESS</b>		<b>Transaction ID: SB23.4866</b> Date of Disbursement
Mailing Address P.O. Box 58606		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City Houston	State TX	Zip Code 77258
Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>	
Candidate Name NICOLAS LAMPSON	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 22		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 13 / 16

<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)  
PROGRESSIVE CHOICES PAC

**A. LARRY KISSELL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1530

City BISCOE State NC Zip Code 27209

Purpose of Disbursement Contribution

Candidate Name LARRY KISSELL

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: NC District: 08

Transaction ID: SB23.4854

Date of Disbursement

10 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

**B. MASSA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 59 EAST MARKET STREET SUITE 244

City CORNING State NY Zip Code 14830

Purpose of Disbursement Contribution

Candidate Name ERIC JJ MASSA

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: NY District: 29

Transaction ID: SB23.4862

Date of Disbursement

10 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

**C. MCNERNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement Contribution

Candidate Name JERRY MCNERNEY

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: CA District: 11

Transaction ID: SB23.4846

Date of Disbursement

10 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)  
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) <b>A. MEJIAS FOR CONGRESS</b>		<b>Transaction ID: SB23.4856</b> Date of Disbursement
Mailing Address 124 SUNRISE DRIVE		<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="27"/> <input type="text" value="0"/> / <input type="text" value="2006"/> <input type="text" value="6"/>
City N MASSAPEQUA	State NY	Zip Code 11758
Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>	
Candidate Name DAVID L MEJIAS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 03		

Full Name (Last, First, Middle Initial) <b>B. NANCY BOYDA FOR CONGRESS</b>		<b>Transaction ID: SB23.4834</b> Date of Disbursement
Mailing Address 510 SW 10TH STREET		<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="25"/> <input type="text" value="0"/> / <input type="text" value="2006"/> <input type="text" value="6"/>
City TOPEKA	State KS	Zip Code 66612
Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>	
Candidate Name NANCY E BOYDA	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District: 02		

Full Name (Last, First, Middle Initial) <b>C. Jon Samuel</b>		<b>Transaction ID: SB23.4807</b> Date of Disbursement
Mailing Address 1101 Fairmont Street NW #2		<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="30"/> <input type="text" value="0"/> / <input type="text" value="2006"/> <input type="text" value="6"/>
City Washington	State DC	Zip Code 20009
Purpose of Disbursement In-kind Contribution: Travel	<input type="text" value="458.79"/>	
Candidate Name PHILIP G HARE	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2458.79"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 15 / 16

<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)  
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) <b>A. Jon Samuel</b>		<b>Transaction ID: SB23.4808</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1101 Fairmont Street NW #2		Amount of Each Disbursement this Period 203.44
City Washington State DC Zip Code 20009	Category/ Type	
Purpose of Disbursement In-kind Contribution: Travel		
Candidate Name PHILIP G HARE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. YARMUTH FOR CONGRESS</b>		<b>Transaction ID: SB23.4852</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1815 Brownsboro Road Ste 100 Suite 100		Amount of Each Disbursement this Period 1000.00
City Louisville State KY Zip Code 40206	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name JOHN A YARMUTH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ZACK SPACE FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.4832</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 1000.00
City DOVER State OH Zip Code 44622	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name ZACHARY T SPACE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2203.44</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>23662.23</b>

# 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 16 / 16

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

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

**A.** Full Name (Last, First, Middle Initial)  
Florida 13 Recount Fund

Mailing Address P.O. Box 49135

City Sarasota State FL Zip Code 34230

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB29.4872

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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