

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Swing the Vote

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		2725.48
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	198.97									
(c) Total Receipts (from Line 19)	1666.64	2450.26								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1865.61	5175.74								
7. Total Disbursements (from Line 31)	1070.64	4380.77								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	794.97	794.97								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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
Swing the Vote

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	519.63	1042.63
(i) Itemized (use Schedule A)		
(ii) Unitemized	1147.01	1407.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1666.64	2450.26
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1666.64	2450.26
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))	1666.64	2450.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1666.64	2450.26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	312.24	3622.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	312.24	3622.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	758.40	758.40
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.....	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))..	1070.64	4380.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1070.64	4380.77

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)	1666.64	2450.26
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1666.64	2450.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	312.24	3622.37
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	312.24	3622.37

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Swing the Vote

A.

Full Name (Last, First, Middle Initial)
Donors Anonymous

Mailing Address No Address

City State Zip Code
None NH

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 449.91

Date of Receipt MM / DD / YYYY
10 / 15 / 2007

Transaction ID: SA11AI.5570

Amount of Each Receipt this Period 73.17

small cash donations at table

B.

Full Name (Last, First, Middle Initial)
Donors Anonymous

Mailing Address No Address

City State Zip Code
None NH

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 458.91

Date of Receipt MM / DD / YYYY
12 / 01 / 2007

Transaction ID: SA11AI.5569

Amount of Each Receipt this Period 9.00

small cash contributions at table

C.

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

Mailing Address 93 Pinedale Rd

City State Zip Code
Athol MA 01331

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HAP, Inc. Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 332.82

Date of Receipt MM / DD / YYYY
10 / 05 / 2007

Transaction ID: SA11AI.5614

Amount of Each Receipt this Period 17.37

in-kind: postage

SUBTOTAL of Receipts This Page (optional) 99.54

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 7 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

A.

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

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

FEC ID number of contributing federal political committee. C

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 339.73

Date of Receipt M M / D D / Y Y Y Y
10 / 10 / 2007

Transaction ID: SA11AI.5585

Amount of Each Receipt this Period 6.91

in-kind: printer paper

B.

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

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

FEC ID number of contributing federal political committee. C

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 372.53

Date of Receipt M M / D D / Y Y Y Y
10 / 10 / 2007

Transaction ID: SA11AI.5615

Amount of Each Receipt this Period 32.80

in-kind: postage

C.

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

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

FEC ID number of contributing federal political committee. C

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 392.91

Date of Receipt M M / D D / Y Y Y Y
10 / 15 / 2007

Transaction ID: SA11AI.5616

Amount of Each Receipt this Period 20.38

in-kind: postage

SUBTOTAL of Receipts This Page (optional) 60.09

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 8 / 24
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

A.

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

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

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

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 393.95

Date of Receipt: 10 / 17 / 2007
Transaction ID: SA11AI.5590
 Amount of Each Receipt this Period: 1.04
 in-kind: (bal. due on printer toner)

B.

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

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

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

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.33

Date of Receipt: 10 / 19 / 2007
Transaction ID: SA11AI.5617
 Amount of Each Receipt this Period: 5.38
 in-kind: postage

C.

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

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

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

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 528.27

Date of Receipt: 10 / 24 / 2007
Transaction ID: SA11AI.5594
 Amount of Each Receipt this Period: 128.94
 in-kind: printer toner

SUBTOTAL of Receipts This Page (optional) ► **135.36**

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 / 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing the Vote

A. Full Name (Last, First, Middle Initial)
Rutilious B. Perkins

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

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

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 546.32

Date of Receipt: 10 / 30 / 2007
Transaction ID: SA11AI.5618
 Amount of Each Receipt this Period: 18.05
 in-kind: postage

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

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

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

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 656.23

Date of Receipt: 12 / 05 / 2007
Transaction ID: SA11AI.5604
 Amount of Each Receipt this Period: 109.91
 in-kind: toner (for mail re: primary)

C. Full Name (Last, First, Middle Initial)
Rutilious B. Perkins

Mailing Address 93 Pinedale Rd

City Athol State MA Zip Code 01331

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

Name of Employer HAP, Inc. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 738.23

Date of Receipt: 12 / 20 / 2007
Transaction ID: SA11AI.5619
 Amount of Each Receipt this Period: 82.00
 in-kind: postage for mail re primary

SUBTOTAL of Receipts This Page (optional) ► 209.96

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 10 / 24	
	(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

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NAME OF COMMITTEE (In Full)
Swing the Vote

A.

Full Name (Last, First, Middle Initial) Rutilious B. Perkins		Date of Receipt	
Mailing Address 93 Pinedale Rd		M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 7	
City Athol	State MA	Zip Code 01331	Transaction ID: SA11AI.5611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.68	
Name of Employer HAP, Inc.	Occupation Attorney	in-kind: env. etc for mail re primary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 752.91		

SUBTOTAL of Receipts This Page (optional)	14.68
TOTAL This Period (last page this line number only)	519.63

**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 11 / 24

<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)
Swing the Vote

A.	Full Name (Last, First, Middle Initial) Amazon.com	Transaction ID: SB21B.5596
	Mailing Address 1150 S Columbia Ave	Date of Disbursement 10 / 24 / 2007
	City Campbellsville State KY Zip Code 42718	Amount of Each Disbursement this Period 128.94
	Purpose of Disbursement in-kind: printer toner (see Perkins) Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5620
	Mailing Address 93 Pinedale Rd	Date of Disbursement 10 / 05 / 2007
	City Athol State MA Zip Code 01331	Amount of Each Disbursement this Period 17.37
	Purpose of Disbursement in-kind: postage Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5586
	Mailing Address 93 Pinedale Rd	Date of Disbursement 10 / 10 / 2007
	City Athol State MA Zip Code 01331	Amount of Each Disbursement this Period 6.91
	Purpose of Disbursement in-kind: printer paper Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

24.28

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 24

<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)
Swing the Vote

A.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5621 Date of Disbursement																			
	Mailing Address 93 Pinedale Rd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	0		2	0	0	7												
	City Athol State MA Zip Code 01331	Amount of Each Disbursement this Period																			
	Purpose of Disbursement in-kind: postage Candidate Name	<table border="1"><tr><td>32.80</td></tr></table>	32.80																		
32.80																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		006 Category/ Type																			

B.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5622 Date of Disbursement																			
	Mailing Address 93 Pinedale Rd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
	City Athol State MA Zip Code 01331	Amount of Each Disbursement this Period																			
	Purpose of Disbursement in-kind: postage Candidate Name	<table border="1"><tr><td>20.38</td></tr></table>	20.38																		
20.38																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		006 Category/ Type																			

C.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5591 Date of Disbursement																			
	Mailing Address 93 Pinedale Rd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	7		2	0	0	7												
	City Athol State MA Zip Code 01331	Amount of Each Disbursement this Period																			
	Purpose of Disbursement in-kind: (bal. due on printer toner) Candidate Name	<table border="1"><tr><td>1.04</td></tr></table>	1.04																		
1.04																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		006 Category/ Type																			

SUBTOTAL of Disbursements This Page (optional) ►

54.22

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 13 / 24

<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)
Swing the Vote

A.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5623 Date of Disbursement 10 / 19 / 2007
	Mailing Address 93 Pinedale Rd	Amount of Each Disbursement this Period 5.38
	City Athol State MA Zip Code 01331	
	Purpose of Disbursement in-kind: postage Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5595 Date of Disbursement 10 / 24 / 2007
	Mailing Address 93 Pinedale Rd	Amount of Each Disbursement this Period 128.94
	City Athol State MA Zip Code 01331	
	Purpose of Disbursement in-kind: printer toner (see Amazon.com) Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5624 Date of Disbursement 10 / 30 / 2007
	Mailing Address 93 Pinedale Rd	Amount of Each Disbursement this Period 18.05
	City Athol State MA Zip Code 01331	
	Purpose of Disbursement in-kind: postage Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	152.37
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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)
Swing the Vote

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.5588
	Mailing Address 1129 Riverdale Rd	Date of Disbursement 10 / 10 / 2007
	City West Springfield State MA Zip Code 01089	Amount of Each Disbursement this Period 6.91
	Purpose of Disbursement in-kind: printer paper (see Perkins) Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.5593
	Mailing Address 125 Westgate Ctr Dr	Date of Disbursement 10 / 17 / 2007
	City Hadley State MA Zip Code 01035	Amount of Each Disbursement this Period 1.04
	Purpose of Disbursement in-kind: (see Perkins) Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US Postal Service - Holyoke	Transaction ID: SB21B.5634
	Mailing Address Holyoke 506 Westfield Rd	Date of Disbursement 10 / 30 / 2007
	City Holyoke State MA Zip Code 01040	Amount of Each Disbursement this Period 18.05
	Purpose of Disbursement in-kind: postage Candidate Name	006 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 24

<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)
Swing the Vote

A. Full Name (Last, First, Middle Initial)
Northampton US Postal Service - N'hampton

Mailing Address 37 Bridge Street

City Northampton State MA Zip Code 01060

Purpose of Disbursement in-kind: postage
Candidate Name

006
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: SB21B.5627
Date of Disbursement

10 / 10 / 2007

Amount of Each Disbursement this Period

32.80

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
US Postal Service - S. Hadley

Mailing Address South Hadley
1 Hadley St

City South Hadley State MA Zip Code 01075

Purpose of Disbursement in-kind: postage
Candidate Name

006
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: SB21B.5630
Date of Disbursement

10 / 15 / 2007

Amount of Each Disbursement this Period

20.38

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
State Street US Postal Service -Springfield

Mailing Address 914 State Street

City Springfield State MA Zip Code 01109

Purpose of Disbursement in-kind: postage
Candidate Name

006
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: SB21B.5632
Date of Disbursement

10 / 19 / 2007

Amount of Each Disbursement this Period

5.38

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 16 / 24

<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)
Swing the Vote

A.	Full Name (Last, First, Middle Initial) Trenton US Postal Service - Trenton	Transaction ID: SB21B.5626 Date of Disbursement
	Mailing Address 680 US Highway 130	<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City Trenton State NJ Zip Code 08650	Amount of Each Disbursement this Period
	Purpose of Disbursement in-kind: postage Candidate Name	<input type="text" value="17.37"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: <input type="text" value="006"/>	

B.	Full Name (Last, First, Middle Initial) Wendell Depot US Postal Service - Wendell D.	Transaction ID: SB21B.5639 Date of Disbursement
	Mailing Address Wendell Depot Rd	<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City Wendell Depot State MA Zip Code 01380	Amount of Each Disbursement this Period
	Purpose of Disbursement postage (see Phillips 12/29) Candidate Name	<input type="text" value="8.20"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: <input type="text" value="003"/>	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="230.87"/>

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Amazon.com

Mailing Address
1150 S Columbia Ave

City Campbellsville	State KY	Zip Code 42718
------------------------	-------------	-------------------

Purpose of Expenditure in-kind: toner (for mail re: primary)	Category/Type 007
---	----------------------

Name of Federal Candidate supported or Opposed by expenditure:

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

Amount
109.91

Transaction ID: SE.5606

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

[MEMO ITEM]

Calendar Year-To-Date Per Election for Office Sought
294.12

Full Name (Last, First, Middle, Initial) of Payee
Maureen Blasco

Mailing Address
67 Norcross Rd

City Royalston	State MA	Zip Code 01368
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Purpose of Expenditure in-kind: postage for mail re: primary	Category/Type 007
---	----------------------

Name of Federal Candidate supported or Opposed by expenditure:

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

Amount
150.00

Transaction ID: SE.5598

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Calendar Year-To-Date Per Election for Office Sought
150.00

(a) SUBTOTAL of Itemized Independent Expenditures	150.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

Leah Anne Anne Brown
Signature

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Leah Anne Anne Brown

Date
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Mailing Address
47 Delle Ave #3

Amount
34.21

City State Zip Code
Roxbury MA 02120

Transaction ID: SE.5602
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
in-kind: labels for mail re: primary
Category/Type 007

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Disbursement For: Primary General
 Other (specify) : _____
2008

Calendar Year-To-Date Per Election for Office Sought
184.21

Full Name (Last, First, Middle, Initial) of Payee
Leah Anne Anne Brown

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

Mailing Address
47 Delle Ave #3

Amount
33.80

City State Zip Code
Roxbury MA 02120

Transaction ID: SE.5608
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
in-kind: postage for primary mail suppl.
Category/Type 007

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Disbursement For: Primary General
 Other (specify) : _____
2008

Calendar Year-To-Date Per Election for Office Sought
327.92

(a) SUBTOTAL of Itemized Independent Expenditures	68.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

Leah Anne Anne Brown
Signature

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Rutilious B. Perkins

Mailing Address
93 Pinedale Rd

City Athol	State MA	Zip Code 01331
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Purpose of Expenditure
in-kind: toner (for mail re: primary)

Category/Type **007**

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought **294.12**

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

Amount
109.91

Transaction ID: SE.5605

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Rutilious B. Perkins

Mailing Address
93 Pinedale Rd

City Athol	State MA	Zip Code 01331
---------------	-------------	-------------------

Purpose of Expenditure
in-kind: postage for-mail re primary

Category/Type **007**

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought **409.92**

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

Amount
82.00

Transaction ID: SE.5625

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	191.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

Leah Anne Anne Brown
Signature

Date **0 2 / 0 7 / 2 0 0 8**

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Rutilious B. Perkins

Mailing Address
93 Pinedale Rd

City Athol	State MA	Zip Code 01331
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Purpose of Expenditure in-kind: env. etc for mail re primary	Category/Type 007
---	----------------------

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought	424.60
--	--------

Date
M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 7

Amount
14.68

Transaction ID: SE.5612

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Judith Phillips

Mailing Address
Box 66

City Wendell Depot	State MA	Zip Code 01380
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Purpose of Expenditure reimb: postage for mail re primary	Category/Type 007
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought	498.40
--	--------

Date
M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 7

Amount
73.80

Transaction ID: SE.5638

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	88.48
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

Leah Anne Anne Brown
Signature

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Jane Hanify Pitt

Mailing Address
482 Stone Pond Rd
P.O. Box 35

City State Zip Code
Marlborough NH 03455

Purpose of Expenditure
reimb postage for ma-
il re primary

Category/
Type **007**

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought **758.40**

Date
M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 7

Amount
260.00

Transaction ID: SE.5642

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Staples

Mailing Address
125 Westgate Ctr Dr

City State Zip Code
Hadley MA 01035

Purpose of Expenditure
in-kind: env. etc for
mail re primary

Category/
Type **007**

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought **424.60**

Date
M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 7

Amount
14.68

Transaction ID: SE.5613

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	260.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

Leah Anne Anne Brown
Signature

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Staples.com

Mailing Address
100 Highland Dr

City Putnam	State CT	Zip Code 06260
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Purpose of Expenditure in-kind: labels for mail re: primary	Category/Type 007
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:

Date
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Amount
34.21

Transaction ID: SE.5603

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

[MEMO ITEM]

Calendar Year-To-Date Per Election for Office Sought
184.21

Full Name (Last, First, Middle, Initial) of Payee
US Postal Service - Athol

Mailing Address
Athol
242 Main St

City Athol	State MA	Zip Code 01331
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Purpose of Expenditure in-kind: postage for mail re primary	Category/Type 007
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:

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

Amount
82.00

Transaction ID: SE.5635

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

[MEMO ITEM]

Calendar Year-To-Date Per Election for Office Sought
409.92

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

Leah Anne Anne Brown
Signature

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
jamaica Plain US Postal Service - JP

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

Mailing Address
655 Centre Street

Amount
33.80

City State Zip Code
Jamaica Plain MA 02130

Transaction ID: SE.5609
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
in-kind: postage for primary mail suppl. Category/Type 007

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Disbursement For: Primary General
 Other (specify) : _____
2008 **[MEMO ITEM]**

Calendar Year-To-Date Per Election for Office Sought 294.12

Full Name (Last, First, Middle, Initial) of Payee
Rindge US Postal Service - Rindge

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

Mailing Address
1056 NH route 119

Amount
150.00

City State Zip Code
Rindge NH 03461

Transaction ID: SE.5599
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
in-kind: postage for mail re: primary Category/Type 007

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Disbursement For: Primary General
 Other (specify) : _____
2008 **[MEMO ITEM]**

Calendar Year-To-Date Per Election for Office Sought 150.00

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

Leah Anne Anne Brown
Signature

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Rindge US Postal Service - Rindge

Mailing Address
1056 NH route 119

City Rindge	State NH	Zip Code 03461
----------------	-------------	-------------------

Purpose of Expenditure postage: mail re pri- mary (see Pitt 12/29)	Category/ Type 007
--	--------------------------

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

Amount
260.00

Transaction ID: SE.5643

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008
[MEMO ITEM]

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought 150.00

Full Name (Last, First, Middle, Initial) of Payee
Wendell Depot US Postal Service - Wendell D.

Mailing Address
Wendell Depot Rd

City Wendell Depot	State MA	Zip Code 01380
-----------------------	-------------	-------------------

Purpose of Expenditure postage for mail re primary(see Phillips)	Category/ Type 007
--	--------------------------

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

Amount
73.80

Transaction ID: SE.5641

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008
[MEMO ITEM]

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought 327.92

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	758.40

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.

Leah Anne Anne Brown
Signature

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 8