



A. Form/Schedule : **F3XA**

Transaction ID :

Over the course of January 1st through June 30th, 2009, Dickstein Shapiro LLP provided \$2,534.36 in legal and accounting services to the PAC. This reflects general accounting, work on internal reconciliation of PAC transactions, and preparation of the 2008 Year-End report to the Federal Election Commission. The services were provided on various dates by Katie Phillips (\$1,911.84), Laurie McKay (\$66.86), Monica PrahI (\$90.72) and Jeffrey Campbell (\$464.94).

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

Write or Type Committee Name  
Dickstein Shapiro LLP PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

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		63179.36
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	63179.36									
(c) Total Receipts (from Line 19) .....	76996.80	76996.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	140176.16	140176.16								
7. Total Disbursements (from Line 31) .....	70535.03	70535.03								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	69641.13	69641.13								
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

Dickstein Shapiro LLP PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

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) .....	76496.80	76496.80
(ii) Unitemized .....	500.00	500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	76996.80	76996.80
(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) .....	76996.80	76996.80
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)) .....	76996.80	76996.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	76996.80	76996.80

**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.....	1165.03	1165.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1165.03	1165.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	68318.00	68318.00
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 .....	1052.00	1052.00
(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)) .....	1052.00	1052.00
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))..	70535.03	70535.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70535.03	70535.03

**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) .....	76996.80	76996.80
34. Total Contribution Refunds (from Line 28(d)) .....	1052.00	1052.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	75944.80	75944.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1165.03	1165.03
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1165.03	1165.03

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bernays Barclay

Mailing Address 1825 Eye St. NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro LLP Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt: 05 / 13 / 2009  
**Transaction ID:** SA11AI.7761  
 Amount of Each Receipt this Period: 1560.00  
 Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Matt Bergman

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 11 / 2009  
**Transaction ID:** SA11AI.7762  
 Amount of Each Receipt this Period: 300.00  
 Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Mr. George Boggs

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 06 / 11 / 2009  
**Transaction ID:** SA11AI.7763  
 Amount of Each Receipt this Period: 480.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2340.00

**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 8 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Paul Bran

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt: 04 / 25 / 2009  
**Transaction ID: SA11AI.7764**  
 Amount of Each Receipt this Period: 1400.00  
 Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Laura Brutman

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt: 04 / 20 / 2009  
**Transaction ID: SA11AI.7765**  
 Amount of Each Receipt this Period: 760.00  
 Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Deborah Carpentier

Mailing Address 1825 Eye St. NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro LLP Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt: 05 / 15 / 2009  
**Transaction ID: SA11AI.7768**  
 Amount of Each Receipt this Period: 660.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2820.00**

**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 / 53

(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Donald Corbett

Mailing Address 1825 Eye St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation  
Dickstein Shapiro, LLP Partner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.7770

Amount of Each Receipt this Period

960.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Merle DeLancy

Mailing Address 1825 Eye St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation  
Dickstein Shapiro, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1195.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.7771

Amount of Each Receipt this Period

1195.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Dickstein Shapiro, LLP

Mailing Address 1825 Eye St.

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 494.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.7844

Amount of Each Receipt this Period

494.80

In-kind - admin costs

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

2649.80

**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: (check only one)	PAGE 10 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Stephen Dvorkin		Date of Receipt MM / DD / YYYY 06 / 11 / 2009		
	Mailing Address 1825 Eye St., NW		<b>Transaction ID:</b> SA11AI.7772		
	City Washington	State DC	Zip Code 20006	Amount of Each Receipt this Period 1040.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Dickstein Shapiro, LLP	Occupation Attorney	Aggregate Year-to-Date 1040.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Jennifer Eck		Date of Receipt MM / DD / YYYY 04 / 17 / 2009		
	Mailing Address 1825 Eye St., NW		<b>Transaction ID:</b> SA11AI.7773		
	City Washington	State DC	Zip Code 20006	Amount of Each Receipt this Period 700.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Dickstein Shapiro, LLP	Occupation Attorney	Aggregate Year-to-Date 700.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Barry Fleishman		Date of Receipt MM / DD / YYYY 06 / 10 / 2009		
	Mailing Address 1825 Eye St., NW		<b>Transaction ID:</b> SA11AI.7774		
	City Washington	State DC	Zip Code 20006	Amount of Each Receipt this Period 320.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Dickstein Shapiro, LLP	Occupation Attorney	Aggregate Year-to-Date 320.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2060.00
<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: PAGE 11 / 53  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
John Gallagher  
 Mailing Address 1825 Eye St. NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dickstein Shapiro LLP Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00  
 Date of Receipt 05 / 13 / 2009  
**Transaction ID:** SA11AI.7777  
 Amount of Each Receipt this Period 2000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry Garr  
 Mailing Address 1825 Eye St., NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dickstein Shapiro, LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 760.00  
 Date of Receipt 06 / 11 / 2009  
**Transaction ID:** SA11AI.7778  
 Amount of Each Receipt this Period 760.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Don Gregory  
 Mailing Address 1825 Eye St., NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dickstein Shapiro, LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00  
 Date of Receipt 06 / 11 / 2009  
**Transaction ID:** SA11AI.7779  
 Amount of Each Receipt this Period 875.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3635.00  
**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 12 / 53

(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John Grossman

Mailing Address 1825 Eye St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation  
Dickstein Shapiro, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1040.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.7780

Amount of Each Receipt this Period

1040.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Arnold Gulkowitz

Mailing Address 1825 Eye St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation  
Dickstein Shapiro, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.7781

Amount of Each Receipt this Period

1750.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Maria Heard

Mailing Address 1825 Eye St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation  
Dickstein Shapiro, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 760.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.7782

Amount of Each Receipt this Period

760.00

Contribution

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

3550.00

**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: (check only one)	PAGE 13 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Bob Higgins	Date of Receipt MM / DD / YYYY 06 / 11 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7783
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 552.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro, LLP Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 552.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Gary Hoffman	Date of Receipt MM / DD / YYYY 06 / 11 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7784
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 3035.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro, LLP Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 3035.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Andy Jackson	Date of Receipt MM / DD / YYYY 06 / 11 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7785
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro, LLP Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	4787.00
<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: PAGE 14 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Jeff Johnson

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1280.00

Date of Receipt: 05 / 21 / 2009  
**Transaction ID: SA11AI.7786**  
 Amount of Each Receipt this Period: 1280.00  
 Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Leon Kellner

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1720.00

Date of Receipt: 05 / 21 / 2009  
**Transaction ID: SA11AI.7787**  
 Amount of Each Receipt this Period: 1720.00  
 Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jim Kelly

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1320.00

Date of Receipt: 06 / 11 / 2009  
**Transaction ID: SA11AI.7788**  
 Amount of Each Receipt this Period: 1320.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4320.00**

**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 15 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Joe Kolick

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1075.00

Date of Receipt: 06 / 11 / 2009

Transaction ID: SA11AI.7790

Amount of Each Receipt this Period: 1075.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Mark Kolman

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 06 / 11 / 2009

Transaction ID: SA11AI.7791

Amount of Each Receipt this Period: 1200.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Al Kramer

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1320.00

Date of Receipt: 05 / 21 / 2009

Transaction ID: SA11AI.7792

Amount of Each Receipt this Period: 1320.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3595.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Victoria Kummer

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 13 / 2009

Transaction ID: SA11AI.7793

Amount of Each Receipt this Period 900.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Richard LaCava

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 11 / 2009

Transaction ID: SA11AI.7794

Amount of Each Receipt this Period 700.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Dan Litt

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2040.00

Date of Receipt 06 / 11 / 2009

Transaction ID: SA11AI.7795

Amount of Each Receipt this Period 2040.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3640.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 17 / 53  
(check only one)

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<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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Fred Lowther

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2910.00

Date of Receipt: MM / DD / YYYY 05 / 21 / 2009

Transaction ID: SA11AI.7796

Amount of Each Receipt this Period 2910.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Patrick Lynch

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: MM / DD / YYYY 05 / 13 / 2009

Transaction ID: SA11AI.7797

Amount of Each Receipt this Period 1200.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Melanie Maloney

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: MM / DD / YYYY 06 / 11 / 2009

Transaction ID: SA11AI.7798

Amount of Each Receipt this Period 600.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4710.00

**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 18 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Milton Marquis

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 990.00

Date of Receipt: MM / DD / YYYY 05 / 21 / 2009

Transaction ID: SA11AI.7799

Amount of Each Receipt this Period 990.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Ed Meilman

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: MM / DD / YYYY 06 / 11 / 2009

Transaction ID: SA11AI.7800

Amount of Each Receipt this Period 900.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Gianni Minutoli

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY 06 / 12 / 2009

Transaction ID: SA11AI.7803

Amount of Each Receipt this Period 100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1990.00

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Gianni Minutoli

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 06 / 26 / 2009

Transaction ID: SA11AI.7804

Amount of Each Receipt this Period: 100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Ira Mitzner

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 04 / 22 / 2009

Transaction ID: SA11AI.7805

Amount of Each Receipt this Period: 900.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Daniel Morgan

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 06 / 12 / 2009

Transaction ID: SA11AI.7807

Amount of Each Receipt this Period: 290.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1290.00

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

**SCHEDULE A (FEC Form 3X)  
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 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Morgan

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt 06 / 26 / 2009

Transaction ID: SA11AI.7808

Amount of Each Receipt this Period 290.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter Morgan

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1915.00

Date of Receipt 06 / 11 / 2009

Transaction ID: SA11AI.7809

Amount of Each Receipt this Period 1915.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ken Morrow

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1160.00

Date of Receipt 06 / 11 / 2009

Transaction ID: SA11AI.7810

Amount of Each Receipt this Period 1160.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3365.00

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

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

Use separate schedule(s)  
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 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bob Moss

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt 05 / 01 / 2009

Transaction ID: SA11AI.7811

Amount of Each Receipt this Period 760.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
James Murray

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 05 / 13 / 2009

Transaction ID: SA11AI.7812

Amount of Each Receipt this Period 1060.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. David Nadler

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1960.00

Date of Receipt 06 / 11 / 2009

Transaction ID: SA11AI.7813

Amount of Each Receipt this Period 1960.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3780.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Michael Nannes

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2040.00

Date of Receipt: 06 / 11 / 2009  
Transaction ID: SA11AI.7814  
Amount of Each Receipt this Period: 2040.00  
Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Eric Oliver

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 06 / 11 / 2009  
Transaction ID: SA11AI.7815  
Amount of Each Receipt this Period: 900.00  
Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Kirk Pasich

Mailing Address 1825 Eye St, NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3035.00

Date of Receipt: 06 / 11 / 2009  
Transaction ID: SA11AI.7816  
Amount of Each Receipt this Period: 3035.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5975.00

**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: (check only one)	PAGE 23 / 53
	<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)  
Dickstein Shapiro LLP PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Woody Peterson	Date of Receipt MM / DD / YYYY 05 / 21 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7817
	City State Zip Code Washinton DC 20006	Amount of Each Receipt this Period 1080.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro, LLP    Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1080.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. George Pitts	Date of Receipt MM / DD / YYYY 06 / 11 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7818
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 960.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro, LLP    Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 960.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Denise Plunkett	Date of Receipt MM / DD / YYYY 06 / 11 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7819
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro LLP    Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2440.00
<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: PAGE 24 / 53  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ira Polon

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 10 / 2009  
Transaction ID: SA11AI.7820  
Amount of Each Receipt this Period: 600.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Adam Proujansky

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 06 / 11 / 2009  
Transaction ID: SA11AI.7821  
Amount of Each Receipt this Period: 800.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey Rhodes

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 05 / 01 / 2009  
Transaction ID: SA11AI.7822  
Amount of Each Receipt this Period: 700.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2100.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 53  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steve Roman

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer: Dickstein Shapiro, LLP Occupation: Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 21 / 2009  
Transaction ID: SA11AI.7823  
Amount of Each Receipt this Period: 300.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steve Roman

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer: Dickstein Shapiro, LLP Occupation: Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 11 / 2009  
Transaction ID: SA11AI.7824  
Amount of Each Receipt this Period: 300.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Ms Gabrielle Roth

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer: Dickstein Shapiro, LLP Occupation: Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt: 05 / 13 / 2009  
Transaction ID: SA11AI.7825  
Amount of Each Receipt this Period: 570.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1170.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 26 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Michael Rustum

Mailing Address 2107 L Street, NW

City Washington State DC Zip Code 20037

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

Name of Employer: Dickstein Shapiro Morin & Oshinsky, LLP  
Occupation: Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 860.00

Date of Receipt: 06 / 11 / 2009  
Transaction ID: SA11AI.7826  
Amount of Each Receipt this Period: 860.00  
Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Andrew Schifrin

Mailing Address 1825 Eye St. NW

City Washington State DC Zip Code 20006

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

Name of Employer: Dickstein Shapiro LLP  
Occupation: Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1160.00

Date of Receipt: 06 / 03 / 2009  
Transaction ID: SA11AI.8042  
Amount of Each Receipt this Period: 1160.00  
Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Ms Elizabeth Sherwin

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer: Dickstein Shapiro, LLP  
Occupation: Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 05 / 21 / 2009  
Transaction ID: SA11AI.7827  
Amount of Each Receipt this Period: 1200.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3220.00

**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 27 / 53  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harvey Sherzer

Mailing Address 1825 Eye St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation  
Dickstein Shapiro, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2009

**Transaction ID:** SA11AI.7828

Amount of Each Receipt this Period  
1560.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Brian Siff

Mailing Address 1825 Eye St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation  
Dickstein Shapiro, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2009

**Transaction ID:** SA11AI.7829

Amount of Each Receipt this Period  
900.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Ms. Deborah Skakel

Mailing Address 1825 Eye St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation  
Dickstein Shapiro, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
06 / 11 / 2009

**Transaction ID:** SA11AI.7830

Amount of Each Receipt this Period  
200.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2660.00

**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: (check only one)	PAGE 28 / 53
	<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)  
Dickstein Shapiro LLP PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Salvatore Tamburo	Date of Receipt MM / DD / YYYY 05 / 13 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7831
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 680.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro, LLP   Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Paul Taskier	Date of Receipt MM / DD / YYYY 06 / 11 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7832
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 980.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro, LLP   Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 980.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Edward Tessler	Date of Receipt MM / DD / YYYY 05 / 21 / 2009
	Mailing Address 1825 Eye St., NW	<b>Transaction ID:</b> SA11AI.7833
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 1040.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer: Dickstein Shapiro, LLP   Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1040.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2700.00
<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: PAGE 29 / 53  
(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)  
Dickstein Shapiro LLP PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Mark Thronson

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 11 / 2009  
**Transaction ID: SA11AI.7834**  
 Amount of Each Receipt this Period: 1000.00  
 Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Ms Beth Webb

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt: 06 / 11 / 2009  
**Transaction ID: SA11AI.7835**  
 Amount of Each Receipt this Period: 960.00  
 Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Andy Weiner

Mailing Address 1825 Eye St. NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro LLP Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 05 / 13 / 2009  
**Transaction ID: SA11AI.7838**  
 Amount of Each Receipt this Period: 680.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2640.00**

**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 30 / 53  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven Weinstein

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 01 / 2009  
Transaction ID: SA11AI.7839  
Amount of Each Receipt this Period 600.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steve Weisburd

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2760.00

Date of Receipt 06 / 11 / 2009  
Transaction ID: SA11AI.7840  
Amount of Each Receipt this Period 2760.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Michael Wentworth

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Dickstein Shapiro, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 11 / 2009  
Transaction ID: SA11AI.7841  
Amount of Each Receipt this Period 700.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4060.00

**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 31 / 53	
	(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)  
Dickstein Shapiro LLP PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Adam Ziffer		Date of Receipt																					
	Mailing Address 1825 Eye St., NW		<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>0</td><td>6</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		1	1		2	0	0	9														
	City State Zip Code Washington DC 20006		<b>Transaction ID:</b> SA11AI.7842																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00																					
Name of Employer Occupation Dickstein Shapiro, LLP Attorney		Contribution																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	76496.80

**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 32 / 53

<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)  
Dickstein Shapiro LLP PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Dickstein Shapiro, LLP <hr/> Mailing Address 1825 Eye St. <hr/> City Washington State DC Zip Code 20006 <hr/> Purpose of Disbursement Administrative Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.7848 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 670.23
<b>B.</b> Full Name (Last, First, Middle Initial) Dickstein Shapiro, LLP <hr/> Mailing Address 1825 Eye St. <hr/> City Washington State DC Zip Code 20006 <hr/> Purpose of Disbursement In-kind - admin costs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.7845 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 494.80

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

1165.03

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

1165.03



B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.7845**

This memo text refers to the in-kind contribution of \$494.80 from Dickstein Shapiro LLP for administrative costs, which is reflected on line 11a and 21b. These in-kind services provided by the firm represent very limited staff time, overhead, supplies, and postage associated with functions, such as raising funds for the PAC. No separate staff or office space is available for PAC administrative functions and almost all communication is via the Internet. Thus, resulting administrative costs are minimal.

# 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)  
Dickstein Shapiro LLP PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) BARBARA LEE FOR CONGRESS</p> <p>Mailing Address 1736 Franklin Street #550</p> <p>City Oakland State CA Zip Code 94612</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name BARBARA LEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 09</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7656</p> <p>Date of Disbursement 01 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bennett Election Committee</p> <p>Mailing Address 175 South West Temple Suite 650</p> <p>City Salt Lake City State UT Zip Code 84101</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name ROBERT F BENNETT</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7691</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BOOZMAN FOR CONGRESS</p> <p>Mailing Address PO BOX 671</p> <p>City ROGERS State AR Zip Code 72757</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name JOHN NICHOLS BOOZMAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7683</p> <p>Date of Disbursement 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

**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)  
Dickstein Shapiro LLP PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>BOUCHER FOR CONGRESS COMMITTEE</b></p> <p>Mailing Address PO BOX 2000</p> <p>City ABINGDON State VA Zip Code 24212</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name FREDRICK C BOUCHER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7714</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>CARNAHAN IN CONGRESS</b></p> <p>Mailing Address 7370 Manchester Rd STE 20</p> <p>City St. Louis State MO Zip Code 63143</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name RUSS CARNAHAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7755</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>CHANDLER FOR CONGRESS</b></p> <p>Mailing Address PO BOX 12678</p> <p>City LEXINGTON State KY Zip Code 40583</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name A.B. III CHANDLER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7738</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p>

**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)

PAGE 36 / 53

<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

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)  
Dickstein Shapiro LLP PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) CHARLIE MELANCON CAMPAIGN COMMITTEE INC</p> <p>Mailing Address PO Box 549 PO BOX 549</p> <p>City Napoleonville State LA Zip Code 70390</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name CHARLIE JR. MELANCON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7703</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) COBURN FOR SENATE 2010</p> <p>Mailing Address POST OFFICE BOX 977</p> <p>City MUSKOGEE State OK Zip Code 74402</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name THOMAS A COBURN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7750</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 2385.76</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT LORETTA SANCHEZ</p> <p>Mailing Address 1212 S. Victory Blvd. Suite 211</p> <p>City BURBANK State CA Zip Code 91502</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name LORETTA SANCHEZ</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7723</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

3885.76

**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)  
Dickstein Shapiro LLP PAC

**A. COMMITTEE TO RE-ELECT ED TOWNS**

Full Name (Last, First, Middle Initial)

Mailing Address 438 Lewis Avenue

City Brooklyn State NY Zip Code 11233

Purpose of Disbursement Contribution

Candidate Name EDOLPHUS TOWNS

Office Sought:  House  Senate  President

State: NY District: 10

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB23.7664

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

**B. CONGRESSMAN BART GORDON COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 2008

City MURFREESBORO State TN Zip Code 37133

Purpose of Disbursement Contribution

Candidate Name BARTON JENNINGS GORDON

Office Sought:  House  Senate  President

State: TN District: 06

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB23.7704

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2009

Amount of Each Disbursement this Period

1000.00

**C. Dickstein Shapiro, LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 Eye St.

City Washington State DC Zip Code 20006

Purpose of Disbursement In-Kind- Fundraiser Admin Costs

Candidate Name TODD TIAHRT

Office Sought:  House  Senate  President

State: KS District: 00

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB23.7710

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2009

Amount of Each Disbursement this Period

161.28

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

2161.28

**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 38 / 53

<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)  
Dickstein Shapiro LLP PAC

A.

Full Name (Last, First, Middle Initial)  
Dickstein Shapiro, LLP

Transaction ID: SB23.7720  
Date of Disbursement

Mailing Address 1825 Eye St.

/   /

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement  
In-Kind- Fundraiser Admin Costs

Category/  
Type

Candidate Name  
BENNIE G. THOMPSON

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MS District: 02

B.

Full Name (Last, First, Middle Initial)  
Dickstein Shapiro, LLP

Transaction ID: SB23.7728  
Date of Disbursement

Mailing Address 1825 Eye St.

/   /

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement  
In-Kind- Fundraiser Admin Costs

Category/  
Type

Candidate Name  
LONGLEAF PINE PAC

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Dickstein Shapiro, LLP

Transaction ID: SB23.7733  
Date of Disbursement

Mailing Address 1825 Eye St.

/   /

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement  
In-Kind- Fundraiser Admin Costs

Category/  
Type

Candidate Name  
ED WHITFIELD

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: KY District: 01

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)  
Dickstein Shapiro LLP PAC

A.	Full Name (Last, First, Middle Initial) Dickstein Shapiro, LLP	Transaction ID: SB23.7737 Date of Disbursement 06 / 11 / 2009
	Mailing Address 1825 Eye St.	Amount of Each Disbursement this Period 97.44
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement In-Kind- Fundraiser Admin Costs	Category/ Type
	Candidate Name E BENJAMIN NELSON	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dickstein Shapiro, LLP	Transaction ID: SB23.7752 Date of Disbursement 06 / 18 / 2009
	Mailing Address 1825 Eye St.	Amount of Each Disbursement this Period 114.24
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement In-Kind- Fundraiser Admin Costs	Category/ Type
	Candidate Name COBURN FOR SENATE 2010	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRANK KRATOVIL FOR CONGRESS	Transaction ID: SB23.7679 Date of Disbursement 03 / 12 / 2009
	Mailing Address 222 Main Sail Drive PO Box 518	Amount of Each Disbursement this Period 1000.00
	City Stevensville State MD Zip Code 21666	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name FRANK KRATOVIL	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1211.68
<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)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF BENNIE THOMPSON

Mailing Address P.O. Box 100  
P.O. Box 100

City Bolton State MS Zip Code 39041

Purpose of Disbursement  
Contribution

Candidate Name  
BENNIE G. THOMPSON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MS District: 02

Transaction ID: SB23.7718

Date of Disbursement

05 / 21 / 2009

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF BYRON DORGAN

Mailing Address PO BOX 871

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement  
Contribution

Candidate Name  
BYRON L DORGAN

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: ND District: 00

Transaction ID: SB23.7745

Date of Disbursement

06 / 17 / 2009

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF CHRIS DODD

Mailing Address PO BOX 270701

City WEST HARTFORD State CT Zip Code 06127

Purpose of Disbursement  
Contribution

Candidate Name  
CHRISTOPHER J DODD

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District: 00

Transaction ID: SB23.7662

Date of Disbursement

02 / 04 / 2009

Amount of Each Disbursement this Period

2500.00

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

6000.00

**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)  
Dickstein Shapiro LLP PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CHRIS DODD	Transaction ID: SB23.7758 Date of Disbursement
	Mailing Address PO BOX 270701	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City WEST HARTFORD State CT Zip Code 06127	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name CHRISTOPHER J DODD	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS	Transaction ID: SB23.7692 Date of Disbursement
	Mailing Address PO BOX 308	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SILVER SPRINGS State FL Zip Code 34489	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name CLIFFORD B STEARNS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOE WILSON FOR CONGRESS COMMITTEE	Transaction ID: SB23.7702 Date of Disbursement
	Mailing Address PO Box 2145	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City West Columbia State SC Zip Code 29171	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name JOE WILSON	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<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)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
JOHN D DINGELL FOR CONGRESS COMMITTEE

Mailing Address 607 FOURTEENTH STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN D DINGELL

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MI District: 15

Transaction ID: SB23.7688

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
JOHN SHADEGGS FRIENDS

Mailing Address PO BOX 45444

City Phoenix State AZ Zip Code 85064

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN B. SHADEGG

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: AZ District: 03

Transaction ID: SB23.7744

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
JOHN SPRATT FOR CONGRESS COMMITTEE

Mailing Address POST OFFICE BOX 10986

City ROCK HILL State SC Zip Code 29731

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN MCKEE JR SPRATT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: SC District: 05

Transaction ID: SB23.7668

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)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
JOHN SPRATT FOR CONGRESS COMMITTEE

Mailing Address POST OFFICE BOX 10986

City State Zip Code  
ROCK HILL SC 29731

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN MCKEE JR SPRATT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: SC District: 05

Transaction ID: SB23.7739

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
KANSANS FOR TIAHRT

Mailing Address 2250 N ROCK ROAD SUITE 118A

City State Zip Code  
WICHITA KS 67226

Purpose of Disbursement  
Contribution

Candidate Name  
TODD TIAHRT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: KS District: 00

Transaction ID: SB23.7709

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
KENDRICK MEEK FOR FLORIDA

Mailing Address 111 NW 183RD STREET SUITE 325

City State Zip Code  
MIAMI FL 33169

Purpose of Disbursement  
Contribution

Candidate Name  
KENDRICK B MEEK

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: FL District: 00

Transaction ID: SB23.7672

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)  
Dickstein Shapiro LLP PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>KENDRICK MEEK FOR FLORIDA</b>	<b>Transaction ID:</b> SB23.7705 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 9	
	Mailing Address 111 NW 183RD STREET SUITE 325		Amount of Each Disbursement this Period 2500.00
	City MIAMI State FL Zip Code 33169		
	Purpose of Disbursement Contribution		
	Candidate Name KENDRICK B MEEK		Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: FL District: 00		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>KLOBUCHAR FOR MINNESOTA 2012</b>	<b>Transaction ID:</b> SB23.7680 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9	
	Mailing Address PO BOX 4146		Amount of Each Disbursement this Period 2000.00
	City ST PAUL State MN Zip Code 55104		
	Purpose of Disbursement Contribution		
	Candidate Name AMY J KLOBUCHAR		Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MN District: 00		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>KLOBUCHAR FOR MINNESOTA 2012</b>	<b>Transaction ID:</b> SB23.7681 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9	
	Mailing Address PO BOX 4146		Amount of Each Disbursement this Period 500.00
	City ST PAUL State MN Zip Code 55104		
	Purpose of Disbursement Contribution		
	Candidate Name AMY J KLOBUCHAR		Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MN District: 00		

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

5000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
**KURT SCHRADER FOR CONGRESS**

Mailing Address 2236 SE 10th Ave  
Suite 240

City Portland State OR Zip Code 97214

Purpose of Disbursement  
Contribution

Candidate Name  
**KURT SCHRADER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OR District: 05

**Transaction ID:** SB23.7697

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**LONGLEAF PINE PAC**

Mailing Address 703 GREEN VALLEY ROAD SUITE 201

City GREENSBORO State NC Zip Code 27408

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23.7756

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

Mailing Address P.O. BOX 8084

City JONESBORO State AR Zip Code 72403

Purpose of Disbursement  
Contribution

Candidate Name  
**MARION BERRY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: AR District: 01

**Transaction ID:** SB23.7682

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)

PAGE 47 / 53

<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)  
Dickstein Shapiro LLP PAC

A.	Full Name (Last, First, Middle Initial) RICHARD BURR COMMITTEE	Transaction ID: SB23.7698 Date of Disbursement																			
	Mailing Address POST OFFICE BOX 5928	<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>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	9												
	City WINSTON-SALEM State NC Zip Code 27113	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name RICHARD M BURR	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) ROBERT WEXLER FOR CONGRESS COMMITTEE	Transaction ID: SB23.7686 Date of Disbursement																			
	Mailing Address 2500 NORTH MILITARY TRAIL STE 288	<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>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	9												
	City BOCA RATON State FL Zip Code 33431	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name ROBERT WEXLER	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) ROGERS FOR CONGRESS	Transaction ID: SB23.7678 Date of Disbursement																			
	Mailing Address PO Box 581 Post Office Box 581	<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>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City Brighton State MI Zip Code 48116	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name MICHAEL J ROGERS	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# 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)  
Dickstein Shapiro LLP PAC

A.

Full Name (Last, First, Middle Initial)  
RYAN FOR CONGRESS

Transaction ID: SB23.7676  
Date of Disbursement

Mailing Address P. O. Box 1919  
P. O. Box 1919

/   /

City Janesville State WI Zip Code 53547

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

Candidate Name  
PAUL D. RYAN

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WI District: 01

B.

Full Name (Last, First, Middle Initial)  
Seasons Culinary

Transaction ID: SB23.7711  
Date of Disbursement

Mailing Address 1825 Eye St., NW

/   /

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement  
In-Kind- Fundraiser Food Costs

Candidate Name  
TODD TIAHRT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: KS District: 00

C.

Full Name (Last, First, Middle Initial)  
Seasons Culinary

Transaction ID: SB23.7719  
Date of Disbursement

Mailing Address 1825 Eye St., NW

/   /

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement  
In-Kind- Fundraiser Food Costs

Candidate Name  
BENNIE G. THOMPSON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MS District: 02

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)  
Dickstein Shapiro LLP PAC

A.	Full Name (Last, First, Middle Initial) Seasons Culinary	Transaction ID: SB23.7730 Date of Disbursement																			
	Mailing Address 1825 Eye St., NW	<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>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	9		2	0	0	9												
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period																			
	Purpose of Disbursement In-Kind- Fundraiser Food Costs	<table border="1"><tr><td>268.29</td></tr></table>	268.29																		
268.29																					
	Candidate Name LONGLEAF PINE PAC	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Seasons Culinary	Transaction ID: SB23.7732 Date of Disbursement																			
	Mailing Address 1825 Eye St., NW	<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>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	0	9												
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period																			
	Purpose of Disbursement In-Kind- Fundraiser Food Costs	<table border="1"><tr><td>334.18</td></tr></table>	334.18																		
334.18																					
	Candidate Name ED WHITFIELD	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: KY District: 01																				

C.	Full Name (Last, First, Middle Initial) Seasons Culinary	Transaction ID: SB23.7736 Date of Disbursement																			
	Mailing Address 1825 Eye St., NW	<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>0</td><td>6</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	1		2	0	0	9												
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period																			
	Purpose of Disbursement In-Kind- Fundraiser Food Costs	<table border="1"><tr><td>299.20</td></tr></table>	299.20																		
299.20																					
	Candidate Name E BENJAMIN NELSON	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: NE District: 00																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>901.67</td></tr></table>	901.67
901.67		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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)  
Dickstein Shapiro LLP PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Seasons Culinary  Mailing Address 1825 Eye St., NW  City Washington State DC Zip Code 20006  Purpose of Disbursement In-Kind- Fundraiser Food Costs  Candidate Name THOMAS A COBURN  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OK District: 00	<b>Transaction ID:</b> SB23.7751 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 9  Amount of Each Disbursement this Period  411.40
<b>B.</b>	Full Name (Last, First, Middle Initial) SENATE CONSERVATIVES FUND  Mailing Address 228 S. Washington St., Ste. 115  City Alexandria State VA Zip Code 22314  Purpose of Disbursement Contribution  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.7713 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 9  Amount of Each Disbursement this Period  2000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Tom Rooney for Congress  Mailing Address 2336 SouthEast Ocean Blvd, Ste 313  City Stuart State FL Zip Code 34996  Purpose of Disbursement Contribution  Candidate Name Thomas Joseph Rooney  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.7687 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period  1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3411.40</b>
<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)  
Dickstein Shapiro LLP PAC

A.

Full Name (Last, First, Middle Initial)  
UDALL FOR COLORADO INC

Transaction ID: SB23.7740  
Date of Disbursement

Mailing Address 8690 Wolff Court #200

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	0	9

City Westminster State CO Zip Code 80031

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

1000.00
---------

Candidate Name  
MARK E UDALL

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CO District: 00

B.

Full Name (Last, First, Middle Initial)  
VISCLOSKY FOR CONGRESS

Transaction ID: SB23.7665  
Date of Disbursement

Mailing Address P.O. Box 10003

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	0	9

City Merrillville State IN Zip Code 46411

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

1000.00
---------

Candidate Name  
PETER J VISCLOSKY

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IN District: 01

C.

Full Name (Last, First, Middle Initial)  
WALDEN FOR CONGRESS

Transaction ID: SB23.7852  
Date of Disbursement

Mailing Address PO Box 1091

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	9

City Hood River State OR Zip Code 97031

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

1500.00
---------

Candidate Name  
GREGORY P WALDEN

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OR District: 02

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

3500.00
---------

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

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# 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)  
Dickstein Shapiro LLP PAC

**A.** Full Name (Last, First, Middle Initial)  
**WHITFIELD FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241

Purpose of Disbursement  
Contribution

Candidate Name  
ED WHITFIELD

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: KY District: 01

Transaction ID: SB23.7731

Date of Disbursement

/

Amount of Each Disbursement this Period

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

Mailing Address 607 14TH STREET NW SUITE 800

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.7677

Date of Disbursement

/

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**ZACK SPACE FOR CONGRESS COMMITTEE**

Mailing Address 726 Sixteenth Street NE

City Massillon State OH Zip Code 44646

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 18

Transaction ID: SB23.7727

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)

PAGE 53 / 53

<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 checked="" 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)  
Dickstein Shapiro LLP PAC

A.

Full Name (Last, First, Middle Initial)  
Mr. Jim Kelly

Mailing Address 1825 Eye St., NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A.7789

Date of Disbursement

06 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

1000.00