

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1500 K Street NW
Suite 1100
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00370759
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2009 through 06 30 2009

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

Type or Print Name of Treasurer Jennifer Blum

Signature of Treasurer Electronically Filed by Jennifer Blum Date 07 31 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Drinker Biddle Political Action Committee

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		48121.90
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	48121.90									
(c) Total Receipts (from Line 19)	28484.51	28484.51								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	76606.41	76606.41								
7. Total Disbursements (from Line 31)	44345.57	44345.57								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32260.84	32260.84								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	2104.50									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
 Drinker Biddle Political Action Committee

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)	25494.99	25494.99
(ii) Unitemized	1152.45	1152.45
(iii) TOTAL (add Lines 11(a)(i) and (ii)	26647.44	26647.44
(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)	26647.44	26647.44
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.)	1837.07	1837.07
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))	28484.51	28484.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28484.51	28484.51

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3966.00	3966.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3966.00	3966.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40379.57	40379.57
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	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))..	44345.57	44345.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44345.57	44345.57

DETAILED SUMMARY PAGE
of Disbursements

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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)	26647.44	26647.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26647.44	26647.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3966.00	3966.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3966.00	3966.00

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

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

FOR LINE NUMBER: PAGE 6 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
 Drinker Biddle Political Action Committee

A. Full Name (Last, First, Middle Initial)
 Mr. Howard Blum
 Mailing Address 202 Windsor Avenue
 City State Zip Code
 Elkins Park PA 19027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Drinker Biddle & Reath Attorney
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
Transaction ID: 90319.C11806
 Amount of Each Receipt this Period
 1200.00
 Receipt
 Payroll Deduction: (300.0-0/Pay Period)

B. Full Name (Last, First, Middle Initial)
 Jeffrey R. Blumberg
 Mailing Address 1958 Westgate Terr.
 City State Zip Code
 Highland Park IL 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Drinker Biddle & Reath LLP Attorney
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 312.50
 Date of Receipt
 M M / D D / Y Y Y Y Y
Transaction ID: 90319.C11807
 Amount of Each Receipt this Period
 312.50
 Receipt
 Payroll Deduction: (62.50-/Pay Period)

C. Full Name (Last, First, Middle Initial)
 Ms. Dorothy Bolinsky
 Mailing Address 4 Tara Drive
 City State Zip Code
 Mt. Laurel NJ 08054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Drinker Biddle & Reath Attorney
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
Transaction ID: 90319.C11808
 Amount of Each Receipt this Period
 250.00
 Receipt
 Payroll Deduction: (50.00-/Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **1762.50**
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 7 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Stephen Burdumy		Date of Receipt
	Mailing Address 413 Penwyn Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Wynnewood	PA	19096
	FEC ID number of contributing federal political committee. C		Transaction ID: 90319.C11810
Name of Employer Drinker Biddle & Reath		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 261.37
			Receipt
			Payroll Deduction: (261.3-7/Pay Period)

B.	Full Name (Last, First, Middle Initial) Mr. Stephen Burdumy		Date of Receipt
	Mailing Address 413 Penwyn Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Wynnewood	PA	19096
	FEC ID number of contributing federal political committee. C		Transaction ID: 90715.C11876
Name of Employer Drinker Biddle & Reath		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 718.74
			Receipt
			Payroll Deduction: (239.5-8/Pay Period)

C.	Full Name (Last, First, Middle Initial) Darren S. Cahr		Date of Receipt
	Mailing Address 1920 W. Cuyler		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Chicago	IL	60613
	FEC ID number of contributing federal political committee. C		Transaction ID: 90319.C11811
Name of Employer Drinker Biddle & Reath LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 208.35
			Receipt
			Payroll Deduction: (41.67-/Pay Period)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1188.46
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 8 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 Drinker Biddle Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Thomas Campion

Mailing Address 148 Woodland Road

City State Zip Code
 Madison NJ 07940

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

Name of Employer Occupation
 Drinker Biddle & Reath Attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Transaction ID: 90319.C11812

Amount of Each Receipt this Period
 900.00

Receipt

Payroll Deduction: (225.0-0/Pay Period)

B. Full Name (Last, First, Middle Initial)
Dennis J. Carlin

Mailing Address 33 W. Huron Unit 405

City State Zip Code
 Chicago IL 60654

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

Name of Employer Occupation
 Drinker Biddle & Reath LLP Attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 708.32

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Transaction ID: 90319.C11813

Amount of Each Receipt this Period
 708.32

Receipt

Payroll Deduction: (177.0-8/Pay Period)

C. Full Name (Last, First, Middle Initial)
John J. DAndrea

Mailing Address 29 Fife Drive

City State Zip Code
 Slingerlands NY 12159

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

Name of Employer Occupation
 Drinker Biddle & Reath LLP Attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 541.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Transaction ID: 90319.C11814

Amount of Each Receipt this Period
 541.68

Receipt

Payroll Deduction: (135.4-2/Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **2150.00**

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 9 / 42
	<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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mary E. Devlin Capizzi	Date of Receipt
	Mailing Address 4616 Norwood Dr.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Chevy Chase MD 20815	Transaction ID: 90319.C11815
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00
Name of Employer Drinker Biddle & Reath LLP	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	Payroll Deduction: (150.0-0/Pay Period)

B.	Full Name (Last, First, Middle Initial) Mary E. Devlin Capizzi	Date of Receipt
	Mailing Address 4616 Norwood Dr.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Chevy Chase MD 20815	Transaction ID: 90715.C11881
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 375.00
Name of Employer Drinker Biddle & Reath LLP	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	Payroll Deduction: (125.0-0/Pay Period)

C.	Full Name (Last, First, Middle Initial) Seamus Duffy	Date of Receipt
	Mailing Address P.o. Box 185	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Valley Forge PA 19481	Transaction ID: 90319.C11816
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1250.00
Name of Employer Drinker Biddle & Reath	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	Payroll Deduction: (312.5-0/Pay Period)

SUBTOTAL of Receipts This Page (optional)	1775.00
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 10 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lawrence W Falbe	Date of Receipt
	Mailing Address 13948 W. Trail Drive	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Mettawa IL 60045	Transaction ID: 90319.C11818
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 416.65
	Name of Employer Occupation Drinker Biddle & Reath LLP Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.65	Payroll Deduction: (83.33- /Pay Period)

B.	Full Name (Last, First, Middle Initial) Allen V. Farber	Date of Receipt
	Mailing Address 2754 N. Nelson St.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Arlington VA 22207	Transaction ID: 90319.C11819
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
	Name of Employer Occupation Drinker Biddle & Reath LLP Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Payroll Deduction: (250.0- 0/Pay Period)

C.	Full Name (Last, First, Middle Initial) Allen V. Farber	Date of Receipt
	Mailing Address 2754 N. Nelson St.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Arlington VA 22207	Transaction ID: 90715.C11885
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 624.99
	Name of Employer Occupation Drinker Biddle & Reath LLP Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 874.99	Payroll Deduction: (208.3- 3/Pay Period)

SUBTOTAL of Receipts This Page (optional)	1291.64
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 11 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 Drinker Biddle Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Richard Goldman

Mailing Address 227 Pleasant Valley

City Titusville State NJ Zip Code 08560

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

Name of Employer Drinker Biddle & Reath Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt / /

Transaction ID: 90319.C11821

Amount of Each Receipt this Period 800.00

Receipt

Payroll Deduction: (200.0-0/Pay Period)

B. Full Name (Last, First, Middle Initial)
Jerald M. Goodman

Mailing Address 1720 Somerset Street

City Dresher State PA Zip Code 19025

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

Name of Employer Drinker Biddle & Reath LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 90.91

Date of Receipt / /

Transaction ID: 90319.C11822

Amount of Each Receipt this Period 90.91

Receipt

Payroll Deduction: (90.91-/Pay Period)

C. Full Name (Last, First, Middle Initial)
Jerald M. Goodman

Mailing Address 1720 Somerset Street

City Dresher State PA Zip Code 19025

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

Name of Employer Drinker Biddle & Reath LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.90

Date of Receipt / /

Transaction ID: 90715.C11888

Amount of Each Receipt this Period 249.99

Receipt

Payroll Deduction: (83.33-/Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **1140.90**

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 12 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Neil Haimm	Date of Receipt
	Mailing Address 268 N. Bowman Avenue	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Merion Station PA 19066	Transaction ID: 90319.C11823
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 875.00
	Name of Employer Occupation Drinker Biddle & Reath Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	Payroll Deduction: (218.7-5/Pay Period)

B.	Full Name (Last, First, Middle Initial) Laurie A. Holmes	Date of Receipt
	Mailing Address 1301 W George St	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Chicago IL 60657	Transaction ID: 90319.C11825
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 208.35
	Name of Employer Occupation Drinker Biddle & Reath LLP Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.35	Payroll Deduction: (41.67-/Pay Period)

C.	Full Name (Last, First, Middle Initial) Ballard Jamieson	Date of Receipt
	Mailing Address 4605 Langdrum Lane	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Chevy Chase MD 20815	Transaction ID: 90319.C11826
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 833.32
	Name of Employer Occupation Drinker Biddle & Reath LLP Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.32	Payroll Deduction: (208.3-3/Pay Period)

SUBTOTAL of Receipts This Page (optional)	1916.67
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 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Andrew Kassner		Date of Receipt
	Mailing Address 514 Craig Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Villanova	PA	19085
	FEC ID number of contributing federal political committee. C		Transaction ID: 90319.C11827
Name of Employer Drinker Biddle & Reath		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 666.68	<input type="text"/> 666.68
			Receipt
			Payroll Deduction: (166.6-7/Pay Period)

B.	Full Name (Last, First, Middle Initial) Bennett W. Lasko		Date of Receipt
	Mailing Address 1459 Linden Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Highland Park	IL	60035
	FEC ID number of contributing federal political committee. C		Transaction ID: 90319.C11828
Name of Employer Drinker Biddle & Reath LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 181.82	<input type="text"/> 181.82
			Receipt
			Payroll Deduction: (181.8-2/Pay Period)

C.	Full Name (Last, First, Middle Initial) Bennett W. Lasko		Date of Receipt
	Mailing Address 1459 Linden Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Highland Park	IL	60035
	FEC ID number of contributing federal political committee. C		Transaction ID: 90715.C11893
Name of Employer Drinker Biddle & Reath LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 681.83	<input type="text"/> 500.01
			Receipt
			Payroll Deduction: (166.6-7/Pay Period)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1348.51
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ross A. Lewin	Date of Receipt
	Mailing Address 45 Crusher Rd.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Hopewell NJ 08525	Transaction ID: 90319.C11830
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 214.29
	Name of Employer: Drinker Biddle & Reath 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: 214.29	Receipt Payroll Deduction: (214.2-9/Pay Period)

B.	Full Name (Last, First, Middle Initial) Ross A. Lewin	Date of Receipt
	Mailing Address 45 Crusher Rd.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Hopewell NJ 08525	Transaction ID: 90715.C11895
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 375.00
	Name of Employer: Drinker Biddle & Reath 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: 589.29	Receipt Payroll Deduction: (125.0-0/Pay Period)

C.	Full Name (Last, First, Middle Initial) Mr. Howard Liberman	Date of Receipt
	Mailing Address 1339 30th Street, Nw	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Washington DC 20007	Transaction ID: 90319.C11831
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 666.68
	Name of Employer: Drinker Biddle & Reath Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 666.68	Receipt Payroll Deduction: (166.6-7/Pay Period)

SUBTOTAL of Receipts This Page (optional)	1255.97
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 15 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Joaquin Marquez	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 418 Forest Beach Road	Transaction ID: 90319.C11832
	City State Zip Code Annapolis MD 21409	Amount of Each Receipt this Period 416.65
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Drinker Biddle & Reath Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 416.65	Payroll Deduction: (83.33- /Pay Period)

B.	Full Name (Last, First, Middle Initial) Mr. Philip Mause	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 5108 Palisade Lane, Nw	Transaction ID: 90319.C11833
	City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Drinker Biddle & Reath Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 200.00	Payroll Deduction: (200.0-0 /Pay Period)

C.	Full Name (Last, First, Middle Initial) Mr. Philip Mause	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 5108 Palisade Lane, Nw	Transaction ID: 90319.C11863
	City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 333.32
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Drinker Biddle & Reath Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 533.32	Payroll Deduction: (83.33- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	949.97
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 16 / 42
(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)
Drinker Biddle Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael McManus

Mailing Address 7102 Rebecca Drive

City State Zip Code
Alexandria VA 22307

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

Name of Employer
Drinker Biddle & Reath

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
333.32

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: 90319.C11835

Amount of Each Receipt this Period
333.32

Receipt

Payroll Deduction: (83.33-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Mr. Gregg Melinson

Mailing Address 330 Dundee Drive

City State Zip Code
Blue Bell PA 19422

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

Name of Employer
Drinker Biddle & Reath

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
666.68

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: 90319.C11836

Amount of Each Receipt this Period
666.68

Receipt

Payroll Deduction: (166.6-
7/Pay Period)

C. Full Name (Last, First, Middle Initial)
Michael E Mermall

Mailing Address 908 N. Wood St.
#3

City State Zip Code
Chicago IL 60622

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

Name of Employer
Drinker Biddle & Reath LLP

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
71.43

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: 90319.C11837

Amount of Each Receipt this Period
71.43

Receipt

Payroll Deduction: (71.43-
/Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **1071.43**

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 17 / 42
	<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)
 Drinker Biddle Political Action Committee

A.

Full Name (Last, First, Middle Initial) Michael E Mermall	Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 908 N. Wood St. #3	Transaction ID: 90319.C11864
City Chicago State IL Zip Code 60622	Amount of Each Receipt this Period 166.68
FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Drinker Biddle & Reath LLP Occupation Attorney	Payroll Deduction: (41.67- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.11

B.

Full Name (Last, First, Middle Initial) Gregory P. Miller	Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 516 Pine Street Apt. 2702	Transaction ID: 90319.C11839
City Philadelphia State PA Zip Code 19106	Amount of Each Receipt this Period 357.14
FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Drinker Biddle & Reath LLP Occupation Attorney	Payroll Deduction: (357.1- 4/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14

C.

Full Name (Last, First, Middle Initial) Gregory P. Miller	Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 516 Pine Street Apt. 2702	Transaction ID: 90715.C11905
City Philadelphia State PA Zip Code 19106	Amount of Each Receipt this Period 624.99
FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Drinker Biddle & Reath LLP Occupation Attorney	Payroll Deduction: (208.3- 3/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 982.13

SUBTOTAL of Receipts This Page (optional)	1148.81
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 / 42

(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)
Drinker Biddle Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Michael Miller

Mailing Address 29 Strickland Way

City State Zip Code
Glen Mills PA 19342

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

Name of Employer Occupation
Drinker Biddle & Reath Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
142.86

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: 90319.C11840

Amount of Each Receipt this Period
142.86

Receipt
Payroll Deduction: (142.8-6/Pay Period)

B.

Full Name (Last, First, Middle Initial)
Michael Miller

Mailing Address 29 Strickland Way

City State Zip Code
Glen Mills PA 19342

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

Name of Employer Occupation
Drinker Biddle & Reath Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
392.85

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: 90715.C11904

Amount of Each Receipt this Period
249.99

Receipt
Payroll Deduction: (83.33-/Pay Period)

C.

Full Name (Last, First, Middle Initial)
Paul G. Moorehead

Mailing Address 1355 Jonquil St. Nw

City State Zip Code
Washington DC 20012

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

Name of Employer Occupation
Drinker Biddle & Reath LLP Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
833.35

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: 90319.C11841

Amount of Each Receipt this Period
833.35

Receipt
Payroll Deduction: (166.6-7/Pay Period)

SUBTOTAL of Receipts This Page (optional)

1226.20

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 19 / 42
	<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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth A. Murphy	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 6801 Lincoln Drive	Transaction ID: 90319.C11842
	City Philadelphia State PA Zip Code 19119	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (130.0-0/Pay Period)
Name of Employer Drinker Biddle & Reath LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 130.00	

B.	Full Name (Last, First, Middle Initial) Kenneth A. Murphy	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 6801 Lincoln Drive	Transaction ID: 90319.C11867
	City Philadelphia State PA Zip Code 19119	Amount of Each Receipt this Period 433.32
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (108.3-3/Pay Period)
Name of Employer Drinker Biddle & Reath LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 563.32	

C.	Full Name (Last, First, Middle Initial) Mr. John Przypyszny	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1635 Maddux Lane	Transaction ID: 90319.C11843
	City Mclean State VA Zip Code 22101	Amount of Each Receipt this Period 333.32
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (83.33-/Pay Period)
Name of Employer Drinker Biddle & Reath	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.32	

SUBTOTAL of Receipts This Page (optional)	896.64
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 20 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Alfred Putnam	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 124 Bleddyn Road	Transaction ID: 90319.C11845
	City Ardmore State PA Zip Code 19003	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Drinker Biddle & Reath Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00	Payroll Deduction: (300.0-0/Pay Period)

B.	Full Name (Last, First, Middle Initial) Charles Reid	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address P.o. Box 716 52 Branch Road	Transaction ID: 90319.C11846
	City Gladstone State NJ Zip Code 07934	Amount of Each Receipt this Period 729.15
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Drinker Biddle & Reath Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 729.15	Payroll Deduction: (145.8-3/Pay Period)

C.	Full Name (Last, First, Middle Initial) Gary J. Rinkerman	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 3238 Sherman Street	Transaction ID: 90319.C11847
	City Fairfax State VA Zip Code 22030	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Drinker Biddle & Reath LLP Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	Payroll Deduction: (50.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	2179.15
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 21 / 42
(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)
Drinker Biddle Political Action Committee

A.

Full Name (Last, First, Middle Initial) John J. Scally		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 101 Pleasantville Road		Transaction ID: 90319.C11848
City New Vernon	State NJ	Zip Code 07976
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 227.27
Name of Employer Drinker Biddle & Reath LLP	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.27	Payroll Deduction: (227.2-7/Pay Period)

B.

Full Name (Last, First, Middle Initial) John J. Scally		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 101 Pleasantville Road		Transaction ID: 90319.C11870
City New Vernon	State NJ	Zip Code 07976
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 833.32
Name of Employer Drinker Biddle & Reath LLP	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1060.59	Payroll Deduction: (208.3-3/Pay Period)

C.

Full Name (Last, First, Middle Initial) David Shechtman		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 436 Haverford Road		Transaction ID: 90319.C11849
City Wynnewood	State PA	Zip Code 19096
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 666.68
Name of Employer Drinker Biddle & Reath LLP	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.68	Payroll Deduction: (166.6-7/Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	1727.27
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 22 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michael J. Sheehan	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 426 N. Adams Street	Transaction ID: 90319.C11850
	City Hinsdale State IL Zip Code 60521	Amount of Each Receipt this Period 90.91
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Drinker Biddle & Reath LLP Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 90.91	Payroll Deduction: (90.91- /Pay Period)

B.	Full Name (Last, First, Middle Initial) Michael J. Sheehan	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 426 N. Adams Street	Transaction ID: 90715.C11915
	City Hinsdale State IL Zip Code 60521	Amount of Each Receipt this Period 249.99
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Drinker Biddle & Reath LLP Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.90	Payroll Deduction: (83.33- /Pay Period)

C.	Full Name (Last, First, Middle Initial) Mr. Robert Skitol	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 10409 Great Arbor Drive	Transaction ID: 90319.C11851
	City Potomac State MD Zip Code 20854	Amount of Each Receipt this Period 166.66
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Drinker Biddle & Reath Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 166.66	Payroll Deduction: (166.6-6 /Pay Period)

SUBTOTAL of Receipts This Page (optional)	507.56
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 / 42
	<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)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Robert Skitol	Date of Receipt
	Mailing Address 10409 Great Arbor Drive	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Potomac MD 20854	Transaction ID: 90715.C11916
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 249.99
	Name of Employer: Drinker Biddle & Reath Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 416.65	Receipt Payroll Deduction: (83.33- /Pay Period)

B.	Full Name (Last, First, Middle Initial) Mr. Norm St. Landau	Date of Receipt
	Mailing Address 300 Oak Farm Lane	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Centreville MD 21617	Transaction ID: 90319.C11852
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 333.32
	Name of Employer: Drinker Biddle & Reath Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 333.32	Receipt Payroll Deduction: (83.33- /Pay Period)

C.	Full Name (Last, First, Middle Initial) Sanford M Stein	Date of Receipt
	Mailing Address 985 Auburn	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Highland Park IL 60035	Transaction ID: 90319.C11853
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 666.68
	Name of Employer: Drinker Biddle & Reath 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: 666.68	Receipt Payroll Deduction: (166.6- 7/Pay Period)

SUBTOTAL of Receipts This Page (optional)	1249.99
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 24 / 42

(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)
Drinker Biddle Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Charles Vinicombe

Mailing Address 680 Woodrow Avenue

City State Zip Code
Bridgewater NJ 08807

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

Name of Employer Occupation
Drinker Biddle & Reath Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: 90319.C11854

Amount of Each Receipt this Period

375.00

Receipt

Payroll Deduction: (75.00- /Pay Period)

B.

Full Name (Last, First, Middle Initial)
David J. Woolf

Mailing Address 300 North Princeton Avenue

City State Zip Code
Swarthmore PA 19081

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

Name of Employer Occupation
Drinker Biddle & Reath LLP Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 333.32

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: 90319.C11855

Amount of Each Receipt this Period

333.32

Receipt

Payroll Deduction: (83.33- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

708.32

TOTAL This Period (last page this line number only)

25494.99

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 25 / 42
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
 Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Drinker Biddle & Reath		Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 1500 K Street, Nw Suite 1100		Transaction ID: 90729.C12022
	City Washington	State DC	Zip Code 20005-
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11382.50
	Name of Employer	Occupation Law Firm	Exempt Legal/Accounting Serv.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] Period: 01/01/2009-06/30/-2009

B.	Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee		Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address PO Box 64		Transaction ID: 90715.C11922
	City Beckley	State WV	Zip Code 25802-
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1400.00
	Name of Employer	Occupation	Other Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1400.00	NOTE: For room/catering costs

C.	Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee		Date of Receipt MM / DD / YYYY 03 / 17 / 2009
	Mailing Address PO Box 64		Transaction ID: 90715.C11923
	City Beckley	State WV	Zip Code 25802-
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 437.07
	Name of Employer	Occupation	Other Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1837.07	NOTE: For room/catering costs

SUBTOTAL of Receipts This Page (optional)	▶	1837.07
TOTAL This Period (last page this line number only)	▶	1837.07

**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 26 / 42

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

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

NAME OF COMMITTEE (In Full)
Drinker Biddle Political Action Committee

A. Full Name (Last, First, Middle Initial) Drinker Biddle & Reath LLP <hr/> Mailing Address 1500 K Street, NW Suite 1100 <hr/> City Washington State DC Zip Code 20005- <hr/> Purpose of Disbursement Q4 Admin/Q1 Overhead 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) ▼	Transaction ID: 90319.E2953 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1140.00 <hr/> Q4 ADMIN/Q1 OVERHEAD
B. Full Name (Last, First, Middle Initial) Drinker Biddle & Reath LLP <hr/> Mailing Address 1500 K Street, NW Suite 1100 <hr/> City Washington State DC Zip Code 20005- <hr/> Purpose of Disbursement Q1 Admin/Q2 & Q3 overhead 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) ▼	Transaction ID: 90715.E2982 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 2754.00 <hr/> Q1 ADMIN/Q2 & Q3 OVERHEAD

SUBTOTAL of Disbursements This Page (optional)	3894.00
TOTAL This Period (last page this line number only)	3894.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 42

<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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Tammy Baldwin for Congress	Transaction ID: 90715.E2977 Date of Disbursement 04 / 21 / 2009
	Mailing Address P.O. Box 696	Amount of Each Disbursement this Period 1000.00
	City Madison State WI Zip Code 53701-	
	Purpose of Disbursement	Category/Type
	Candidate Name TAMMY BALDWIN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Berkley for Congress	Transaction ID: 90715.E2986 Date of Disbursement 05 / 21 / 2009
	Mailing Address 3069 Conquista Court	Amount of Each Disbursement this Period 1000.00
	City Las Vegas State NV Zip Code 89121-	
	Purpose of Disbursement	Category/Type
	Candidate Name SHELLEY BERKLEY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Michael Bond for Congress	Transaction ID: 90715.E2998 Date of Disbursement 06 / 25 / 2009
	Mailing Address PO Box 6870	Amount of Each Disbursement this Period 500.00
	City Libertyville State IL Zip Code 60048-	
	Purpose of Disbursement	Category/Type
	Candidate Name MICHAEL BOND	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Coble for Congress	Transaction ID: 90715.E2964 Date of Disbursement
	Mailing Address P.O. Box 1177	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Greensboro State NC Zip Code 27402-	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name JOHN HOWARD COBLE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Conyers for Congress	Transaction ID: 90715.E2971 Date of Disbursement
	Mailing Address 1031 N. Edgewood Street	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201-	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name JOHN CONYERS, JR.	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 14	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	Transaction ID: 90717.E3006 Date of Disbursement
	Mailing Address 101 W. Grand Ave, Suite 200	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City Chicago State IL Zip Code 60654-	Amount of Each Disbursement this Period
	Purpose of Disbursement IN-KIND FOR FACILITIES/CATERING	<input type="text" value="725.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
MEMO: IN-KIND FOR FACILITIES/CATERING

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL 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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Friends of Chris Dodd Mailing Address PO Box 270701 City W Hartford State CT Zip Code 06127- Purpose of Disbursement Candidate Name CHRISTOPHER J DODD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2981 Date of Disbursement 06 / 17 / 2009 Amount of Each Disbursement this Period 1000.00 Category/ Type
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 Candidate Name BYRON L DORGAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2992 Date of Disbursement 06 / 09 / 2009 Amount of Each Disbursement this Period 1000.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) Drinker Biddle & Reath LLP Mailing Address 1500 K Street, NW Suite 1100 City Washington State DC Zip Code 20005- Purpose of Disbursement PAYMENT FOR FACILITIES/CATERING Candidate Name DEBORAH DEBBIE HALVORSON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2997 Date of Disbursement 06 / 23 / 2009 Amount of Each Disbursement this Period 1050.00 IN KIND: PAYMENT FOR FACILITIES/CATERING

SUBTOTAL of Disbursements This Page (optional) ▶	3050.00
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)

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<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)
Drinker Biddle Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</p> <p>Mailing Address 1500 K Street, NW Suite 1100</p> <p>City Washington State DC Zip Code 20005-</p> <p>Purpose of Disbursement PAYMENT - DSCC EVENT ROOM/CATERING</p> <p>Candidate Name DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: 90715.E2970 Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 725.00</p> <p>IN KIND: PAYMENT - DSCC EVENT ROOM/CATERING</p>
<p>B. Full Name (Last, First, Middle Initial) Drinker Biddle & Reath LLP</p> <p>Mailing Address 1500 K Street, NW Suite 1100</p> <p>City Washington State DC Zip Code 20005-</p> <p>Purpose of Disbursement STAFF TIME FOR 3/2 RAHALL EVENT</p> <p>Candidate Name NICK JOE RAHALL, II</p> <p>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) ▼</p> <p>State: WV District: 03</p>	<p>Transaction ID: 90715.E3004 Date of Disbursement 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 517.50</p> <p>IN KIND: STAFF TIME FOR 3/2 RAHALL EVENT</p>
<p>C. Full Name (Last, First, Middle Initial) Bill Foster for Congress Committee</p> <p>Mailing Address PO Box 703</p> <p>City Geneva State IL Zip Code 60134-</p> <p>Purpose of Disbursement</p> <p>Candidate Name G. WILLIAM FOSTER</p> <p>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) ▼</p> <p>State: IL District: 14</p>	<p>Transaction ID: 90715.E2985 Date of Disbursement 05 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2242.50

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)
Drinker Biddle Political Action Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Gillibrand for Senate</p> <p>Mailing Address PO Box 15734</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name KIRSTEN ELIZABETH GILLIBRAND</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90715.E2995</p> <p>Date of Disbursement 04 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Goodlatte for Congress</p> <p>Mailing Address P.O. Box 292</p> <p>City Roanoke State VA Zip Code 24002-</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name ROBERT W. GOODLATTE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90715.E2969</p> <p>Date of Disbursement 04 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Halvorson for Congress</p> <p>Mailing Address PO Box 176</p> <p>City Crete State IL Zip Code 60417-</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name DEBORAH DEBBIE HALVORSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90715.E2996</p> <p>Date of Disbursement 06 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 950.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2950.00

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)
Drinker Biddle Political Action Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Halvorson for Congress</p> <p>Mailing Address PO Box 176</p> <p>City State Zip Code Crete IL 60417-</p> <p>Purpose of Disbursement IN-KIND FOR FACILITIES/CATERING</p> <p>Candidate Name DEBORAH DEBBIE HALVORSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90715.E3005</p> <p>Date of Disbursement 06 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1050.00</p> <p>[MEMO ITEM] MEMO: IN-KIND FOR FACILITIES/CATERING</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Halvorson for Congress</p> <p>Mailing Address PO Box 176</p> <p>City State Zip Code Crete IL 60417-</p> <p>Purpose of Disbursement</p> <p>Candidate Name DEBORAH DEBBIE HALVORSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90319.E2958</p> <p>Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Heller for Congress</p> <p>Mailing Address PO Box 750580</p> <p>City State Zip Code Illinois IL 89136-</p> <p>Purpose of Disbursement</p> <p>Candidate Name DEAN HELLER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90715.E2994</p> <p>Date of Disbursement 05 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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)
Drinker Biddle Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Israel for Congress</p> <p>Mailing Address PO Box 777</p> <p>City Deer Park State NY Zip Code 11729-</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name STEVE J ISRAEL Category/Type <input type="text"/></p> <p>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: NY District: 02</p>	<p>Transaction ID: 90715.E2984 Date of Disbursement: 06 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Jesse L. Jackson, Jr. for Congress</p> <p>Mailing Address P.O. Box 490286</p> <p>City Chicago State IL Zip Code 60649-</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name JESSE L JACKSON, JR Category/Type <input type="text"/></p> <p>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: IL District: 02</p>	<p>Transaction ID: 90715.E2972 Date of Disbursement: 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Pennsylvanians for Kanjorski</p> <p>Mailing Address 103 South Hanover Street</p> <p>City Nanticoke State PA Zip Code 18634-</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name PAUL E KANJORSKI Category/Type <input type="text"/></p> <p>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: PA District: 11</p>	<p>Transaction ID: 90715.E2973 Date of Disbursement: 03 / 02 / 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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Friends of Patrick Kennedy <hr/> Mailing Address 400 C St. NE Suite 201 <hr/> City Washington State DC Zip Code 20002- <hr/> Purpose of Disbursement <input type="text"/> Category/Type <input type="text"/> <hr/> Candidate Name PATRICK J KENNEDY <hr/> 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: RI District: 01	Transaction ID: 90715.E2988 Date of Disbursement <input type="text"/> 05 / <input type="text"/> 14 / <input type="text"/> 2009 <hr/> Amount of Each Disbursement this Period <input type="text"/> 1000.00
B.	Full Name (Last, First, Middle Initial) Larson for Congress <hr/> Mailing Address 29 Ruff Circle <hr/> City Glastonbury State CT Zip Code 06033- <hr/> Purpose of Disbursement <input type="text"/> Category/Type <input type="text"/> <hr/> Candidate Name JOHN B LARSON <hr/> 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: CT District: 01	Transaction ID: 90715.E2991 Date of Disbursement <input type="text"/> 06 / <input type="text"/> 15 / <input type="text"/> 2009 <hr/> Amount of Each Disbursement this Period <input type="text"/> 1000.00
C.	Full Name (Last, First, Middle Initial) Leahy for U.S. Senator <hr/> Mailing Address PO Box 1042 <hr/> City Montpelier State VT Zip Code 05601- <hr/> Purpose of Disbursement <input type="text"/> Category/Type <input type="text"/> <hr/> Candidate Name PATRICK LEAHY <hr/> 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: VT District: 00	Transaction ID: 90715.E2983 Date of Disbursement <input type="text"/> 06 / <input type="text"/> 10 / <input type="text"/> 2009 <hr/> Amount of Each Disbursement this Period <input type="text"/> 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text"/> 3000.00
TOTAL 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)

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<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)
Drinker Biddle Political Action Committee

<p>A.</p> <p>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</p> <p>Candidate Name BARBARA LEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 09</p>	<p>Transaction ID: 90715.E2965</p> <p>Date of Disbursement 04 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dan Lipinski for Congress</p> <p>Mailing Address 5838 South Archer Avenue</p> <p>City Chicago State IL Zip Code 60638-</p> <p>Purpose of Disbursement</p> <p>Candidate Name DANIEL WILLIAM LIPINSKI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 03</p>	<p>Transaction ID: 90715.E2966</p> <p>Date of Disbursement 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Buck McKeon for Congress</p> <p>Mailing Address 24265 San Fernando Road</p> <p>City Santa Clarita State CA Zip Code 91321-</p> <p>Purpose of Disbursement</p> <p>Candidate Name HOWARD P MCKEON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 25</p>	<p>Transaction ID: 90715.E2961</p> <p>Date of Disbursement 04 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</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)

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<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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jeff Merkley for Oregon	Transaction ID: 90715.E2968 Date of Disbursement 03 / 25 / 2009
	Mailing Address 2236 SE 10th Ave.	Amount of Each Disbursement this Period 500.00
	City Portland State OR Zip Code 97214-	
	Purpose of Disbursement	Category/Type
	Candidate Name JEFFREY ALAN MERKLEY	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR 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) Citizens for John Olver for Congress	Transaction ID: 90715.E2990 Date of Disbursement 06 / 16 / 2009
	Mailing Address P.O. Box 819	Amount of Each Disbursement this Period 1000.00
	City Amherst State MA Zip Code 01004-	
	Purpose of Disbursement	Category/Type
	Candidate Name JOHN WALTER OLVER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Quigley for Congress	Transaction ID: 90715.E2993 Date of Disbursement 06 / 09 / 2009
	Mailing Address PO Box 13040	Amount of Each Disbursement this Period 1000.00
	City Chicago State IL Zip Code 60613-	
	Purpose of Disbursement	Category/Type
	Candidate Name MIKE QUIGLEY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee	Transaction ID: 90319.E2956 Date of Disbursement
	Mailing Address PO Box 64	<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Beckley State WV Zip Code 25802-	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2300.00"/>
	Candidate Name NICK JOE RAHALL, II	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee	Transaction ID: 90731.E3010 Date of Disbursement
	Mailing Address PO Box 64	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Beckley State WV Zip Code 25802-	Amount of Each Disbursement this Period
	Purpose of Disbursement IN-KIND FOR ROOM RATE EXTRA	<input type="text" value="437.07"/>
	Candidate Name NICK JOE RAHALL, II	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
MEMO: IN-KIND FOR ROOM RATE EXTRA

C.	Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee	Transaction ID: 90731.E3011 Date of Disbursement
	Mailing Address PO Box 64	<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Beckley State WV Zip Code 25802-	Amount of Each Disbursement this Period
	Purpose of Disbursement IN-KIND FOR ROOM RESERVE	<input type="text" value="1400.00"/>
	Candidate Name NICK JOE RAHALL, II	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
MEMO: IN-KIND FOR ROOM RESERVE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2300.00"/>
TOTAL 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)

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<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)
Drinker Biddle Political Action Committee

A. Full Name (Last, First, Middle Initial) Keep Nick Rahall in Congress Committee Mailing Address PO Box 64 City Beckley State WV Zip Code 25802- Purpose of Disbursement IN-KIND FOR STAFF TIME Candidate Name NICK JOE RAHALL, II Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90319.E2957 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 517.50 [MEMO ITEM] MEMO: IN-KIND FOR STAFF TIME

B. Full Name (Last, First, Middle Initial) Friends for Harry Reid Mailing Address PO Box 19163 City Las Vegas State NV Zip Code 89132- Purpose of Disbursement Candidate Name HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2962 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00

C. Full Name (Last, First, Middle Initial) Friends for Harry Reid Mailing Address PO Box 19163 City Las Vegas State NV Zip Code 89132- Purpose of Disbursement Candidate Name HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2978 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
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)

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<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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Schakowsky for Congress Mailing Address P.O. Box 5130 City Evanston State IL Zip Code 60204- Purpose of Disbursement <input type="text"/> Candidate Name JANICE D SCHAKOWSKY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2999 Date of Disbursement <input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/> Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
B.	Full Name (Last, First, Middle Initial) Schakowsky for Congress Mailing Address P.O. Box 5130 City Evanston State IL Zip Code 60204- Purpose of Disbursement <input type="text"/> Candidate Name JANICE D SCHAKOWSKY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2974 Date of Disbursement <input type="text" value="02"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="09"/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
C.	Full Name (Last, First, Middle Initial) Kurt Schrader for Congress Mailing Address 607 N. Main Street Suite 240 City Oregon City State OR Zip Code 97045- Purpose of Disbursement <input type="text"/> Candidate Name KURT SCHRADER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2967 Date of Disbursement <input type="text" value="03"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="09"/> Amount of Each Disbursement this Period <input type="text" value="500.00"/>

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="3500.00"/>
TOTAL 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

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)
Drinker Biddle Political Action Committee

A.	Full Name (Last, First, Middle Initial) Serrano for Congress	Transaction ID: 90715.E2989 Date of Disbursement 05 / 06 / 2009
	Mailing Address 417 New Jersey Ave., SE	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20003-	
	Purpose of Disbursement	Category/Type
	Candidate Name JOSE E SERRANO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 16	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Van Hollen for Congress	Transaction ID: 90715.E2987 Date of Disbursement 05 / 13 / 2009
	Mailing Address 10605 Concord Street	Amount of Each Disbursement this Period 1000.00
	City Kensington State MD Zip Code 20895-	
	Purpose of Disbursement	Category/Type
	Candidate Name VAN HOLLEN, CHRIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Westin Washington DC City Center	Transaction ID: 90715.E3000 Date of Disbursement 02 / 24 / 2009
	Mailing Address 1400 M Street NW	Amount of Each Disbursement this Period 1400.00
	City Washington State DC Zip Code 20005-	
	Purpose of Disbursement ROOM RESERVE FOR RAHALL EVENT	Category/Type
	Candidate Name NICK JOE RAHALL, II	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

IN KIND: ROOM RESERVE FOR RAHALL EVENT

SUBTOTAL of Disbursements This Page (optional) ▶

3400.00

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)
Drinker Biddle Political Action Committee

A. Full Name (Last, First, Middle Initial) Westin Washington DC City Center Mailing Address 1400 M Street NW City Washington State DC Zip Code 20005- Purpose of Disbursement ROOM RATE EXTRA FOR 3/2 EVENT Candidate Name NICK JOE RAHALL, II Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3001 Date of Disbursement 03 / 19 / 2009
	Amount of Each Disbursement this Period 437.07 IN KIND: ROOM RATE EXTRA FOR 3/2 EVENT
B. Full Name (Last, First, Middle Initial) Wyden for Senate Mailing Address PO Box 3498 City Portland State OR Zip Code 97208- Purpose of Disbursement Candidate Name RONALD LEE WYDEN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E2976 Date of Disbursement 02 / 24 / 2009
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)	1437.07
TOTAL This Period (last page this line number only)	40379.57

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Drinker Biddle Political Action Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Drinker Biddle & Reath LLP	Nature of Debt (Purpose): Q2 Admin
Mailing Address 1500 K Street, NW Suite 1100	
City State ZIP Code Washington DC 20005-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS90729.E3007	
Amount Incurred This Period 2104.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 2104.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Drinker Biddle & Reath LLP	Nature of Debt (Purpose): Q4 Admin/Q1 Overhead
Mailing Address 1500 K Street, NW Suite 1100	
City State ZIP Code Washington DC 20005-	

Outstanding Balance Beginning This Period 1140.00	Transaction ID: LS90319.E2953	
Amount Incurred This Period 0.00	Payment This Period 1140.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	2104.50
2) TOTALS This Period (last page this line number only).....	2104.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2104.50