

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 EMILY's List

ADDRESS (number and street) 1120 Connecticut Avenue NW Ste 1100 Washington DC 20036

2. FEC IDENTIFICATION NUMBER C00193433 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 04 01 2007 through 04 30 2007

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 Fines, Caroline Signature of Treasurer Electronically Filed by Fines, Caroline Date 05 17 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
EMILY's List

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		260369.37
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	1330316.03									
(c) Total Receipts (from Line 19)	1202814.74	6189503.07								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2533130.77	6449872.44								
7. Total Disbursements (from Line 31)	1063998.70	4980740.37								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1469132.07	1469132.07								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
EMILY's List

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	510642.50	2517905.92
(i) Itemized (use Schedule A)	347647.14	2190035.83
(ii) Unitemized	858289.64	4707941.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1500.00	1500.00
(b) Political Party Committees	10250.00	29685.81
(c) Other Political Committees (such as PACs)	870039.64	4739127.56
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	9720.79	112075.28
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	8522.02	19533.46
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	314532.29	1318766.77
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	314532.29	1318766.77
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1202814.74	6189503.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	888282.45	4870736.30

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	365925.11	1449920.00
(ii) Non-Federal Share.....	360458.80	1444458.07
(b) Other Federal Operating Expenditures.....	337042.51	1827511.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1063426.42	4721889.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	33824.52
24. Independent Expenditure (use Schedule E)	-5467.72	-5467.72
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	200000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1840.00	8242.00
(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))	1840.00	8242.00
29. Other Disbursements.....	4200.00	22252.50
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))..	1063998.70	4980740.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	703539.90	3536282.30

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	870039.64	4739127.56
34. Total Contribution Refunds (from Line 28(d))	1840.00	8242.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	868199.64	4730885.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	702967.62	3277431.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	9720.79	112075.28
38. Net Operating Expenditures (subtract Line 37 from Line 36)	693246.83	3165355.72

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 EMILY's List

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 7 / 1028

NAME OF COMMITTEE (In Full)

EMILY's List

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

MO RADIO

ACTIVITY IS:

 Fundraising
 Direct Candidate Support

CHECK IF THE RATIO IS:

 New
 Revised
 Same as Previously Reported

FEDERAL %

50.00 %

NONFEDERAL %

50.00 %

Transaction ID:
H2-EL-1134

ACTIVITY OR EVENT IDENTIFIER

Fundraising/PSP 2007

ACTIVITY IS:

 Fundraising
 Direct Candidate Support

CHECK IF THE RATIO IS:

 New
 Revised
 Same as Previously Reported

FEDERAL %

50.00 %

NONFEDERAL %

50.00 %

Transaction ID:
H2-EL-1133

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Merrill Lynch-NF#4	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	TOTAL AMOUNT TRANSFERRED 24293.30
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BREAKDOWN OF TRANSFER RECEIVED		24287.20
i) Total Administrative		Transaction ID: H3-EL-1135
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) PSP07	6.10	Transaction ID: H3-EL-1136
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundraising	6.10	
v) Direct Candidate Support (List of Activity or Event Identifier)		
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Merrill Lynch-NF#1	DATE OF RECEIPT <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7	TOTAL AMOUNT TRANSFERRED <table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	6		2	0	0	7														
2500.00																							

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	<table border="1"><tr><td>0.00</td></tr></table>	0.00	Transaction ID: H3-EL-1147
0.00			
ii) Generic Voter Drive	<table border="1"><tr><td></td></tr></table>		Transaction ID:
iii) Exempt Activities	<table border="1"><tr><td></td></tr></table>		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) PSP07	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00	Transaction ID: H3-EL-1148
2500.00			
b)	<table border="1"><tr><td></td></tr></table>		Transaction ID:
c) Total Amount Transferred for Direct Fundraising	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00	
2500.00			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a)	<table border="1"><tr><td></td></tr></table>		Transaction ID:
b)	<table border="1"><tr><td></td></tr></table>		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support	<table border="1"><tr><td></td></tr></table>		
vi) Public Communications Referring Only to Party (Made by PAC)	<table border="1"><tr><td></td></tr></table>		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Generic Voter Drive)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Exempt Activities)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Direct Fundraising)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Direct Candidate Support)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Public Communications Referring Only to Party)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Total Amount Transferred)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Merrill Lynch-NF#1	DATE OF RECEIPT <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	0	7	TOTAL AMOUNT TRANSFERRED <table border="1"> <tr> <td>6663.19</td> </tr> </table>	6663.19
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	3		2	0	0	7														
6663.19																							

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	<table border="1"><tr><td>6663.19</td></tr></table>	6663.19	Transaction ID: H3-EL-1138
6663.19			
ii) Generic Voter Drive	<table border="1"><tr><td></td></tr></table>		Transaction ID:
iii) Exempt Activities	<table border="1"><tr><td></td></tr></table>		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____	<table border="1"><tr><td></td></tr></table>		Transaction ID:
b) _____	<table border="1"><tr><td></td></tr></table>		Transaction ID:
c) Total Amount Transferred for Direct Fundraising	<table border="1"><tr><td></td></tr></table>		
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____	<table border="1"><tr><td></td></tr></table>		Transaction ID:
b) _____	<table border="1"><tr><td></td></tr></table>		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support	<table border="1"><tr><td></td></tr></table>		
vi) Public Communications Referring Only to Party (Made by PAC)	<table border="1"><tr><td></td></tr></table>		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Generic Voter Drive)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Exempt Activities)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Direct Fundraising)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Direct Candidate Support)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Public Communications Referring Only to Party)	<table border="1"><tr><td></td></tr></table>	
TOTAL This Period (Total Amount Transferred)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Merrill Lynch-NF#4	DATE OF RECEIPT <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	0	7	TOTAL AMOUNT TRANSFERRED 28355.29
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	3		2	0	0	7													

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		27279.11	Transaction ID: H3-EL-1139
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) PSP07	1076.18	Transaction ID: H3-EL-1140	
b)		Transaction ID:	
c) Total Amount Transferred for Direct Fundraising		1076.18	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a)		Transaction ID:	
b)		Transaction ID:	
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Merrill Lynch-NF#1	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	TOTAL AMOUNT TRANSFERRED 8581.50
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	8018.41	Transaction ID: H3-EL-1141
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) PSP07	563.09	Transaction ID: H3-EL-1142
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundraising	563.09	
v) Direct Candidate Support (List of Activity or Event Identifier)		
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT Merrill Lynch-NF#4	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	TOTAL AMOUNT TRANSFERRED 98134.43
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	98134.43	Transaction ID: H3-EL-1143
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Merrill Lynch-NF#4	M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	146004.58

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		144543.56	Transaction ID: H3-EL-1144
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) PSP07	6928.74		Transaction ID: H3-EL-1145
b)			Transaction ID:
c) Total Amount Transferred for Direct Fundraising		6928.74	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) MO RADIO Refund	-5467.72		Transaction ID: H3-EL-1146
b)			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	308925.90
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	11074.11
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	314532.29

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
John Hancock c/o City Bank Delaware

Mailing Address
1615 Brett Road Lock Box 7122

City State Zip Code
New Castle DE 19720

Purpose of Disbursement:
Employment Pension/ 401(k)

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2163974.09

Date MM / DD / YYYY
04 / 02 / 2007

Transaction ID: H4-109323

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25614.43		25614.44		51228.87

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2164096.25

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-108925

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.08		61.08		122.16

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2166505.43

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-108926

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1204.59		1204.59		2409.18

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26880.10		26880.11		53760.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2166595.51		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-108927		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.04		45.04		90.08

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2166645.51		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Meeting/Conference			Transaction ID: H4-108928		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.00		25.00		50.00

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2166825.99		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-108929		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.24		90.24		180.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
160.28		160.28		320.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Catering/Facilities

Category/
Type

Activity or Event Identifier:
AVD07

See Attached Memo Entry

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2166846.48

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-108939

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.24		10.25		20.49

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Internet Services

Category/
Type

Activity or Event Identifier:
AVD07

See Attached Memo Entry

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2166856.47

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-108940

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.99		5.00		9.99

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:
AVD07

See Attached Memo Entry

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2166990.97

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-108941

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.25		67.25		134.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.48		82.50		164.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type
Purpose of Disbursement: Postage			

Activity or Event Identifier:
AVD07
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2166995.30

Date / /
Transaction ID: H4-108942

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.16		2.17		4.33

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type
Purpose of Disbursement: Telephone			

Activity or Event Identifier:
AVD07
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2167174.62

Date / /
Transaction ID: H4-108943

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.66		89.66		179.32

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type
Purpose of Disbursement: Travel/Accommodation /Meals			

Activity or Event Identifier:
AVD07
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2168169.50

Date / /
Transaction ID: H4-108944

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
497.44		497.44		994.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
589.26		589.27		1178.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Cerabona Consulting			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 27 Clear Brook Crossing			Allocated Activity or Event Year-To-Date 55698.94		
City Kennebunk	State ME	Zip Code 04043	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Consulting Fundraising			Transaction ID: H4-108949		
Activity or Event Identifier: PSP07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
225.00		225.00		450.00

B. Full Name (Last, First, Middle Initial) Colonial Parking, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1050 Thomas Jefferson St., #100			Allocated Activity or Event Year-To-Date 2168379.50		
City Washington	State DC	Zip Code 20007	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Parking Fees			Transaction ID: H4-108950		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		105.00		210.00

C. Full Name (Last, First, Middle Initial) Kathleen Coyne-McCoy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 267 Gleaner Chapel Road			Allocated Activity or Event Year-To-Date 2168426.19		
City North Scituate	State RI	Zip Code 02857	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-108952		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.34		23.35		46.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
353.34		353.35		706.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Kathleen Coyne-McCoy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 267 Gleaner Chapel Road			Allocated Activity or Event Year-To-Date 2168436.64		
City North Scituate	State RI	Zip Code 02857	Date M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-108953		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.22		5.23		10.45

B. Full Name (Last, First, Middle Initial) DC Treasurer DC Government			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 96019			Allocated Activity or Event Year-To-Date 2169436.64		
City Washington	State DC	Zip Code 20090-6019	Date M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7		
Purpose of Disbursement: Taxes - Corporate			Transaction ID: H4-108956		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

C. Full Name (Last, First, Middle Initial) Diverse Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9228 Gaither Road			Allocated Activity or Event Year-To-Date 2169444.46		
City Gaithersburg	State MD	Zip Code 20877	Date M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-108957		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.91		3.91		7.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
509.13		509.14		1018.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Diverse Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9228 Gaither Road			Allocated Activity or Event Year-To-Date 2169447.78		
City	State	Zip Code	Category/ Type		
Gaithersburg	MD	20877			
Purpose of Disbursement: Office Supplies Expenses			Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-108958		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.66		1.66		3.32

B. Full Name (Last, First, Middle Initial) Federal Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 371461			Allocated Activity or Event Year-To-Date 55710.44		
City	State	Zip Code	Category/ Type		
Pittsburg	PA	15250-7461			
Purpose of Disbursement: Deliveries			Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: PSP07			Transaction ID: H4-108960		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.75		5.75		11.50

C. Full Name (Last, First, Middle Initial) Gilbert & Wolfand			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Suite 320 2201 Wisconsin Ave., NW			Allocated Activity or Event Year-To-Date 2174057.78		
City	State	Zip Code	Category/ Type		
Washington,	DC	20007			
Purpose of Disbursement: Accounting			Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-108962		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2305.00		2305.00		4610.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2312.41		2312.41		4624.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Greenberg Quinlan Rosner Research Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 10 G Street NE, Suite 400			Allocated Activity or Event Year-To-Date 2202957.78																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-108963			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	0	5	/	2	0	0	7																
Washington	DC	20002																							
Purpose of Disbursement: Polling/Surveys			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14450.00		14450.00		28900.00

B. Full Name (Last, First, Middle Initial) Rochelle Sachs Levin			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 22800 SW 157th Avenue			Allocated Activity or Event Year-To-Date 55932.02																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-108974			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	0	5	/	2	0	0	7																
Miami	FL	33170																							
Purpose of Disbursement: Telephone			Category/ Type																						
Activity or Event Identifier: PSP07 See Attached Memo Entry																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.79		110.79		221.58

C. Full Name (Last, First, Middle Initial) MCI			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P. O. Box 85053			Allocated Activity or Event Year-To-Date 55970.79																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-108975			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	0	5	/	2	0	0	7																
Louisville	KY	40285																							
Purpose of Disbursement: Telephone			Category/ Type																						
Activity or Event Identifier: PSP07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.38		19.39		38.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14580.17		14580.18		29160.35

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address EMILY's List-TX 2720 Pittsburg Street			Allocated Activity or Event Year-To-Date 56136.57		
City State Zip Code Houston TX 77005	Category/ Type		Date MM / DD / YYYY 04 / 05 / 2007		
Purpose of Disbursement: Telephone			Transaction ID: H4-108977		
Activity or Event Identifier: PSP07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.89		82.89		165.78

B. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address EMILY's List-TX 2720 Pittsburg Street			Allocated Activity or Event Year-To-Date 56365.17		
City State Zip Code Houston TX 77005	Category/ Type		Date MM / DD / YYYY 04 / 05 / 2007		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-108978		
Activity or Event Identifier: PSP07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.30		114.30		228.60

C. Full Name (Last, First, Middle Initial) Perkins Coie			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1201 Third Avenue 40th Floor			Allocated Activity or Event Year-To-Date 2207239.78		
City State Zip Code Seattle WA 98101-3099	Category/ Type		Date MM / DD / YYYY 04 / 05 / 2007		
Purpose of Disbursement: Legal Services			Transaction ID: H4-108980		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2141.00		2141.00		4282.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2338.19		2338.19		4676.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Perkins Coie			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1201 Third Avenue 40th Floor			Allocated Activity or Event Year-To-Date 2207240.17																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-108981			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	0	5	/	2	0	0	7																
Seattle	WA	98101-3099																							
Purpose of Disbursement: Postage			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.19		0.20		0.39

B. Full Name (Last, First, Middle Initial) Perkins Coie			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1201 Third Avenue 40th Floor			Allocated Activity or Event Year-To-Date 2207274.17																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-108982			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	0	5	/	2	0	0	7																
Seattle	WA	98101-3099																							
Purpose of Disbursement: Travel/Accommodation /Meals			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.00		17.00		34.00

C. Full Name (Last, First, Middle Initial) Perkins Coie			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1201 Third Avenue 40th Floor			Allocated Activity or Event Year-To-Date 2208056.17																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-108983			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	5	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	0	5	/	2	0	0	7																
Seattle	WA	98101-3099																							
Purpose of Disbursement: Legal Services			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
391.00		391.00		782.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
408.19		408.20		816.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

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

Mailing Address
1201 Third Avenue 40th Floor

City State Zip Code
Seattle WA 98101-3099

Purpose of Disbursement:
Legal Services

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2209736.17

Activity or Event Identifier:
AVD07

Date 04 / 05 / 2007

Transaction ID: H4-108984

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
840.00		840.00		1680.00

B. Full Name (Last, First, Middle Initial)
Sheads & Associates, Ltd.

Mailing Address
Prince William Square 303 Post Office Rd. Bldg A

City State Zip Code
Waldorf MD 20602

Purpose of Disbursement:
Contribution Processing

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2213200.95

Activity or Event Identifier:
AVD07

Date 04 / 05 / 2007

Transaction ID: H4-108990

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1732.39		1732.39		3464.78

C. Full Name (Last, First, Middle Initial)
Sirus Consulting, Inc.

Mailing Address
7550 Southwest 4th Street

City State Zip Code
Plantation FL 33317

Purpose of Disbursement:
Consulting Fundraising

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

56965.17

Activity or Event Identifier:
PSP07

Date 04 / 05 / 2007

Transaction ID: H4-108991

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		300.00		600.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2872.39		2872.39		5744.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) United Parcel Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 7247-0244			Allocated Activity or Event Year-To-Date 2213404.83		
City	State	Zip Code	Category/ Type		
Philadelphia	PA	19170-0001			
Purpose of Disbursement: Deliveries			Date MM / DD / YYYY 04 / 05 / 2007		
Activity or Event Identifier: AVD07			Transaction ID: H4-108996		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
101.94		101.94		203.88

B. Full Name (Last, First, Middle Initial) United Parcel Service			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 7247-0244			Allocated Activity or Event Year-To-Date 57179.86		
City	State	Zip Code	Category/ Type		
Philadelphia	PA	19170-0001			
Purpose of Disbursement: Deliveries			Date MM / DD / YYYY 04 / 05 / 2007		
Activity or Event Identifier: PSP07			Transaction ID: H4-108997		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.34		107.35		214.69

C. Full Name (Last, First, Middle Initial) United Parcel Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 7247-0244			Allocated Activity or Event Year-To-Date 2213528.68		
City	State	Zip Code	Category/ Type		
Philadelphia	PA	19170-0001			
Purpose of Disbursement: Deliveries			Date MM / DD / YYYY 04 / 05 / 2007		
Activity or Event Identifier: AVD07			Transaction ID: H4-108999		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.92		61.93		123.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
271.20		271.22		542.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) United Parcel Service			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 7247-0244			Allocated Activity or Event Year-To-Date 57401.28		
City Philadelphia	State PA	Zip Code 19170-0001	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Deliveries			Transaction ID: H4-109000		
Activity or Event Identifier: PSP07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.71		110.71		221.42

B. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 790406			Allocated Activity or Event Year-To-Date 2213638.83		
City St. Louis	State MO	Zip Code 63179-0406	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Telephone			Transaction ID: H4-109002		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.07		55.08		110.15

C. Full Name (Last, First, Middle Initial) Working Assets			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2041			Allocated Activity or Event Year-To-Date 2213664.59		
City Mechanicsburg	State PA	Zip Code 17055	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Telephone			Transaction ID: H4-109005		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.88		12.88		25.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
178.66		178.67		357.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Patricia Williams

Mailing Address
3 Wyndham Drive

City State Zip Code
Portola Valley CA 94028

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2213874.59

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-109012

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		105.00		210.00

B. Full Name (Last, First, Middle Initial)
Ikon Office Solutions

Mailing Address
P.O. Box 827468

City State Zip Code
Philadelphia PA 19182-7468

Purpose of Disbursement:
Equipment Maintenance

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2216408.15

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-109357

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1266.78		1266.78		2533.56

C. Full Name (Last, First, Middle Initial)
Ikon Office Solutions

Mailing Address
P.O. Box 827468

City State Zip Code
Philadelphia PA 19182-7468

Purpose of Disbursement:
Equipment Rental

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2218250.13

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-109358

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
920.99		920.99		1841.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2292.77		2292.77		4585.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ikon Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 827468			Allocated Activity or Event Year-To-Date 2218416.09		
City Philadelphia	State PA	Zip Code 19182-7468	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-109359		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.98		82.98		165.96

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 58294.54		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accomm/Meals/FR Consulting			Transaction ID: H4-109049		
Activity or Event Identifier: PSP07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
446.63		446.63		893.26

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2218514.34		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109053		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.12		49.13		98.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
578.73		578.74		1157.47

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 58617.96		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals					
Activity or Event Identifier: PSP07 See Attached Memo Entry			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/> Transaction ID: H4-109055		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.71		161.71		323.42

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 58773.96		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Postage					
Activity or Event Identifier: PSP07 See Attached Memo Entry			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/> Transaction ID: H4-109056		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.00		78.00		156.00

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 59154.74		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals					
Activity or Event Identifier: PSP07 See Attached Memo Entry			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/> Transaction ID: H4-109057		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
190.39		190.39		380.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
430.10		430.10		860.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2853			Allocated Activity or Event Year-To-Date 59427.38		
City	State	Zip Code	Category/ Type		
New York	NY	10116-2853			
Purpose of Disbursement: Travel/Accommodation /Meals			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: PSP07 See Attached Memo Entry			Transaction ID: H4-109061		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
136.32		136.32		272.64

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2853			Allocated Activity or Event Year-To-Date 59757.38		
City	State	Zip Code	Category/ Type		
New York	NY	10116-2853			
Purpose of Disbursement: Travel/Accommodation /Meals			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: PSP07 See Attached Memo Entry			Transaction ID: H4-109062		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.00		165.00		330.00

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2218828.82		
City	State	Zip Code	Category/ Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Travel/Accommodation /Meals			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07 See Attached Memo Entry			Transaction ID: H4-109063		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.24		157.24		314.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
458.56		458.56		917.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2219407.16

Activity or Event Identifier:
AVD07

See Attached Memo Entry

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109064

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
289.17		289.17		578.34

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

59820.36

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109067

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.49		31.49		62.98

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

59866.73

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109068

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.18		23.19		46.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
343.84		343.85		687.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type
Purpose of Disbursement: Travel/Accommodation /Meals			

Activity or Event Identifier:
PSP07
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
61110.80

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	7

Transaction ID: H4-109069

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
622.03		622.04		1244.07

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City Ft Lauderdale	State FL	Zip Code 33336-0001	Category/ Type
Purpose of Disbursement: Travel/Accommodation /Meals			

Activity or Event Identifier:
PSP07
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
61682.29

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	7

Transaction ID: H4-109071

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.74		285.75		571.49

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 1270

City Newark	State NJ	Zip Code 07101-1270	Category/ Type
Purpose of Disbursement: Internet Services			

Activity or Event Identifier:
AVD07
See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2219440.01

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	7

Transaction ID: H4-109072

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.42		16.43		32.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
924.19		924.22		1848.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2219466.01		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109074		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.00		13.00		26.00

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2219738.67		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109075		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
136.33		136.33		272.66

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 61976.24		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Meeting/Conference			Transaction ID: H4-109076		
Activity or Event Identifier: PSP07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.97		146.98		293.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
296.30		296.31		592.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 62366.24																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-109077			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	1	1	/	2	0	0	7																
Ft Lauderdale	FL	33336-0001																							
Purpose of Disbursement: Postage			Category/ Type																						
Activity or Event Identifier: PSP07 See Attached Memo Entry																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
195.00		195.00		390.00

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2219796.45																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-109081			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	1	1	/	2	0	0	7																
Ft Lauderdale	FL	33336-0001																							
Purpose of Disbursement: Deliveries			Category/ Type																						
Activity or Event Identifier: AVD07 See Attached Memo Entry																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.89		28.89		57.78

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 62482.91																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-109084			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	1	1	/	2	0	0	7																
Ft Lauderdale	FL	33336-0001																							
Purpose of Disbursement: Office Supplies Expenses/Postage			Category/ Type																						
Activity or Event Identifier: PSP07 See Attached Memo Entry																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.33		58.34		116.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
282.22		282.23		564.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 2219811.40		
City Newark	State NJ	Zip Code 07101-1270	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Internet Services			Transaction ID: H4-109092		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.47		7.48		14.95

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 2221064.22		
City Newark	State NJ	Zip Code 07101-1270	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109093		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
626.41		626.41		1252.82

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 2221212.04		
City Newark	State NJ	Zip Code 07101-1270	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109094		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.91		73.91		147.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
707.79		707.80		1415.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 2221341.31																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	1	/	2	0	0	7																
Newark	NJ	07101-1270	Transaction ID: H4-109095																						
Purpose of Disbursement: Travel/Accommodation /Meals			Category/ Type																						
Activity or Event Identifier: AVD07 See Attached Memo Entry																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.63		64.64		129.27

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 62541.05																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	1	/	2	0	0	7																
Ft Lauderdale	FL	33336-0001	Transaction ID: H4-109096																						
Purpose of Disbursement: Deliveries			Category/ Type																						
Activity or Event Identifier: PSP07 See Attached Memo Entry																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.07		29.07		58.14

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 360001			Allocated Activity or Event Year-To-Date 62549.40																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	1	/	2	0	0	7																
Ft. Lauderdale	FL	33336-0001	Transaction ID: H4-109100																						
Purpose of Disbursement: Deliveries			Category/ Type																						
Activity or Event Identifier: PSP07 See Attached Memo Entry																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.17		4.18		8.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.87		97.89		195.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement:
Internet Services

Category/
Type

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

62565.18

Date 04 / 11 / 2007

Transaction ID: H4-109101

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.89		7.89		15.78

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

62699.05

Date 04 / 11 / 2007

Transaction ID: H4-109102

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.93		66.94		133.87

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals/Postage

Category/
Type

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

62856.26

Date 04 / 11 / 2007

Transaction ID: H4-109103

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.60		78.61		157.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.42		153.44		306.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

62877.40

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109104

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.57		10.57		21.14

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

63024.95

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109105

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.77		73.78		147.55

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
P.O. Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

63380.87

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109106

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.96		177.96		355.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
262.30		262.31		524.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2221402.53		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Telephone			Transaction ID: H4-109110		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.61		30.61		61.22

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2222964.23		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109116		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
780.85		780.85		1561.70

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 63388.87		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109117		
Activity or Event Identifier: PSP07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.00		4.00		8.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
815.46		815.46		1630.92

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
63521.99

Date / /
Transaction ID: H4-109118

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.56		66.56		133.12

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336-0001

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:
PSP07

See Attached Memo Entry

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
63866.29

Date / /
Transaction ID: H4-109119

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.15		172.15		344.30

C. Full Name (Last, First, Middle Initial)
WMATA

Mailing Address
600 5th St., NW

City State Zip Code
Washington DC 20001

Purpose of Disbursement:
Local Transportation

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2223714.23

Date / /
Transaction ID: H4-109121

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
375.00		375.00		750.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
613.71		613.71		1227.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) WMATA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 600 5th St., NW			Allocated Activity or Event Year-To-Date 2224329.23		
City Washington	State DC	Zip Code 20001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Local Transportation			Transaction ID: H4-109122		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
307.50		307.50		615.00

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2224490.91		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109337		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.84		80.84		161.68

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2224963.44		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109338		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
236.26		236.27		472.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
624.60		624.61		1249.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 65198.74		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Computer Services			Transaction ID: H4-109339		
Activity or Event Identifier: PSP07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
666.22		666.23		1332.45

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2226403.44		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Employee Recruitment			Transaction ID: H4-109340		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
720.00		720.00		1440.00

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2226423.34		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Internet Services			Transaction ID: H4-109341		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.95		9.95		19.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1396.17		1396.18		2792.35

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[Empty]	[Empty]	[Empty]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2226829.22		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Office Supplies Expenses					
Activity or Event Identifier: AVD07 See Attached Memo Entry			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/> Transaction ID: H4-109342		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
202.94		202.94		405.88

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 65217.72		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Office Supplies Expenses					
Activity or Event Identifier: PSP07 See Attached Memo Entry			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/> Transaction ID: H4-109343		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.49		9.49		18.98

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2226868.22		
City	State	Zip Code	Category/Type		
Ft Lauderdale	FL	33336-0001			
Purpose of Disbursement: Postage					
Activity or Event Identifier: AVD07 See Attached Memo Entry			Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/> Transaction ID: H4-109344		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.50		19.50		39.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
231.93		231.93		463.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2227398.22		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Local Transportation			Transaction ID: H4-109345		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
265.00		265.00		530.00

B. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2232874.43		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Telephone			Transaction ID: H4-109346		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2738.10		2738.11		5476.21

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 2237589.88		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date MM / DD / YYYY 04 / 11 / 2007		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109347		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2357.72		2357.73		4715.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5360.82		5360.84		10721.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 69987.86		
City Ft Lauderdale	State FL	Zip Code 33336-0001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109348		
Activity or Event Identifier: PSP07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2385.07		2385.07		4770.14

B. Full Name (Last, First, Middle Initial) Arrowhead Mountain Spring Water Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 52237			Allocated Activity or Event Year-To-Date 2237605.86		
City Phoenix	State AZ	Zip Code 85072-2237	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Office Supplies Expenses			Transaction ID: H4-109124		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.99		7.99		15.98

C. Full Name (Last, First, Middle Initial) ATX Telecommunications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O.Box 57194			Allocated Activity or Event Year-To-Date 2239176.65		
City Philadelphia	State PA	Zip Code 19111-7194	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Telephone			Transaction ID: H4-109125		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
785.39		785.40		1570.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3178.45		3178.46		6356.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Campaign Team, Inc. c/o Anna Lidman

Mailing Address
37 Brookview Terrace

City State Zip Code
Portland ME 04102

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

70360.46

Activity or Event Identifier:
PSP07

Date 04 / 12 / 2007

Transaction ID: H4-109128

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.30		186.30		372.60

B. Full Name (Last, First, Middle Initial)
Cambridge Transportation

Mailing Address
36392 Treasury Center

City State Zip Code
Chicago IL 60694-6300

Purpose of Disbursement:
Insurance General

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2239200.65

Activity or Event Identifier:
AVD07

Date 04 / 12 / 2007

Transaction ID: H4-109129

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.00		12.00		24.00

C. Full Name (Last, First, Middle Initial)
Cogent Communications, Inc.

Mailing Address
P.O. Box 791087

City State Zip Code
Baltimore MD 21279-1087

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2239750.65

Activity or Event Identifier:
AVD07

Date 04 / 12 / 2007

Transaction ID: H4-109130

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
275.00		275.00		550.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
473.30		473.30		946.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) DC Government Office of Tax and Revenue			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 96384			Allocated Activity or Event Year-To-Date 2239803.09		
City Washington	State DC	Zip Code 20090	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Taxes - Sales & Use			Transaction ID: H4-109131		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.22		26.22		52.44

B. Full Name (Last, First, Middle Initial) Dell Computer Corporation Dept. 50-0039088557			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 689020			Allocated Activity or Event Year-To-Date 2242265.24		
City Des Moines	State IA	Zip Code 50368-9020	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Furniture & Computer Equipment			Transaction ID: H4-109132		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1231.07		1231.08		2462.15

C. Full Name (Last, First, Middle Initial) Dell Financial Services Payment Processing Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 5292			Allocated Activity or Event Year-To-Date 2251628.40		
City Carol Stream	State IL	Zip Code 60197-5292	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Furniture & Computer Equipment			Transaction ID: H4-109133		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4681.58		4681.58		9363.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5938.87		5938.88		11877.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Diverse Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9228 Gaither Road			Allocated Activity or Event Year-To-Date 2251690.26		
City	State	Zip Code	Category/ Type		
Gaithersburg	MD	20877			
Purpose of Disbursement: Office Supplies			Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109134		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.93		30.93		61.86

B. Full Name (Last, First, Middle Initial) Diverse Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9228 Gaither Road			Allocated Activity or Event Year-To-Date 2251700.18		
City	State	Zip Code	Category/ Type		
Gaithersburg	MD	20877			
Purpose of Disbursement: Office Supplies Expenses			Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109135		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.96		4.96		9.92

C. Full Name (Last, First, Middle Initial) Federal Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 371461			Allocated Activity or Event Year-To-Date 70379.19		
City	State	Zip Code	Category/ Type		
Pittsburg	PA	15250-7461			
Purpose of Disbursement: Deliveries			Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: PSP07			Transaction ID: H4-109136		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.36		9.37		18.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.25		45.26		90.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) General Systems Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8306-D Old Courthouse Road			Allocated Activity or Event Year-To-Date 2251724.18		
City Vienna	State VA	Zip Code 22182	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/> Transaction ID: H4-109137		
Purpose of Disbursement: Programming		Category/ Type			
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="12.00"/>		<input type="text" value="12.00"/>		<input type="text" value="24.00"/>

B. Full Name (Last, First, Middle Initial) General Systems Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8306-D Old Courthouse Road			Allocated Activity or Event Year-To-Date 2251844.18		
City Vienna	State VA	Zip Code 22182	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/> Transaction ID: H4-109138		
Purpose of Disbursement: Data Management		Category/ Type			
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="60.00"/>		<input type="text" value="60.00"/>		<input type="text" value="120.00"/>

C. Full Name (Last, First, Middle Initial) Andrea E Gottfried			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 414 Wynnerwood Road			Allocated Activity or Event Year-To-Date 70727.19		
City Pelham	State NY	Zip Code 10803	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2007"/> Transaction ID: H4-109139		
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type			
Activity or Event Identifier: PSP07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="174.00"/>		<input type="text" value="174.00"/>		<input type="text" value="348.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="246.00"/>		<input type="text" value="246.00"/>		<input type="text" value="492.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Initial Tropical Plant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 95409			Allocated Activity or Event Year-To-Date 2251928.78																						
City	State	Zip Code	Category/ Type																						
Palatine	IL	60095																							
Purpose of Disbursement: Office Supplies Expenses			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	2	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	2	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109142																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.30		42.30		84.60

B. Full Name (Last, First, Middle Initial) Pitney Bowes Global Financial Services LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 856460			Allocated Activity or Event Year-To-Date 2253605.22																						
City	State	Zip Code	Category/ Type																						
Louisville	KY	40285-6460																							
Purpose of Disbursement: Equipment Rental			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	2	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	2	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109145																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
838.22		838.22		1676.44

C. Full Name (Last, First, Middle Initial) Sirus Consulting, Inc.			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 7550 Southwest 4th Street			Allocated Activity or Event Year-To-Date 71102.19																						
City	State	Zip Code	Category/ Type																						
Plantation	FL	33317																							
Purpose of Disbursement: Consulting Fundraising			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	2	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	2	/	2	0	0	7																
Activity or Event Identifier: PSP07			Transaction ID: H4-109156																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
187.50		187.50		375.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1068.02		1068.02		2136.04

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)
Thomas House Coffee Service

Mailing Address
2309 Kansas Ave.

City	State	Zip Code
Silver Spring	MD	20910

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2253657.97

Activity or Event Identifier:
AVD07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	0	7

Transaction ID: H4-109157

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.37		26.38		52.75

B. Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address
P. O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:
Deliveries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2253664.17

Activity or Event Identifier:
AVD07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	0	7

Transaction ID: H4-109159

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.10		3.10		6.20

C. Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address
P. O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:
Deliveries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

71114.03

Activity or Event Identifier:
PSP07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	0	7

Transaction ID: H4-109160

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.92		5.92		11.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.39		35.40		70.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Premium Payment Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2998			Allocated Activity or Event Year-To-Date 2253626.68		
City	State	Zip Code	Category/ Type		
Alpharetta	GA	30023			
Purpose of Disbursement: Insurance Health COBRA			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109163		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-18.74		-18.75		-37.49

B. Full Name (Last, First, Middle Initial) Amanda Bogden			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1770 Columbia Rd. NW			Allocated Activity or Event Year-To-Date 2254863.18		
City	State	Zip Code	Category/ Type		
Washington	DC	20009			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109241		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
618.25		618.25		1236.50

C. Full Name (Last, First, Middle Initial) SaBrina Brown			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3730 5th St. P.O. Box 1265			Allocated Activity or Event Year-To-Date 2257675.73		
City	State	Zip Code	Category/ Type		
North Beach	MD	20714			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109242		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1406.27		1406.28		2812.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2005.78		2005.78		4011.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Lesbia Cajchun

Mailing Address
2902 Kings Chapel Rd, #7

City	State	Zip Code
Falls Church	VA	22042

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2259345.84

Activity or Event Identifier:
AVD07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	0	7

Transaction ID: H4-109243

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
835.05		835.06		1670.11

B. Full Name (Last, First, Middle Initial)
Kimberly Coleman

Mailing Address
1765 Swann St, NW #1

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2260661.92

Activity or Event Identifier:
AVD07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	0	7

Transaction ID: H4-109244

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
658.04		658.04		1316.08

C. Full Name (Last, First, Middle Initial)
Caroline Fines

Mailing Address
10621 Regent Park Court

City	State	Zip Code
Fairfax	VA	22030

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2262797.18

Activity or Event Identifier:
AVD07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	0	7

Transaction ID: H4-109245

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1067.63		1067.63		2135.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2560.72		2560.73		5121.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ray Keating

Mailing Address
816 Lucky Rd

City State Zip Code
Severn MD 21144

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2265016.70

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109246

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1109.76		1109.76		2219.52

B. Full Name (Last, First, Middle Initial)
Britt Cocanour

Mailing Address
6606 Allegheny Ave

City State Zip Code
Takoma Park MD 20912

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2268464.43

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109247

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1723.86		1723.87		3447.73

C. Full Name (Last, First, Middle Initial)
Ellen R Malcolm

Mailing Address
5060 Linnean Avenue, NW

City State Zip Code
Washington, DC 20008

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2272297.42

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109248

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1916.49		1916.50		3832.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4750.11		4750.13		9500.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ellen L Moran			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 8220 Custer Rd			Allocated Activity or Event Year-To-Date 2277006.92																						
City	State	Zip Code	Category/ Type																						
Bethesda	MD	20817																							
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	3	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109249																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2354.75		2354.75		4709.50

B. Full Name (Last, First, Middle Initial) Lisa Robillard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4326 South 36th Street			Allocated Activity or Event Year-To-Date 2278619.89																						
City	State	Zip Code	Category/ Type																						
Arlington	VA	22206																							
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	3	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109250																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
806.48		806.49		1612.97

C. Full Name (Last, First, Middle Initial) Jessica Aune			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 117 Bromley Park Lane			Allocated Activity or Event Year-To-Date 2278712.24																						
City	State	Zip Code	Category/ Type																						
Franklin	TN	37069																							
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	3	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109251																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3207.40		3207.42		6414.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Lauren Caselli

Mailing Address
LXR Hall 410 Georgetown University

City State Zip Code
Washington DC 20057

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2278781.50

Activity or Event Identifier:
AVD07

Date 04 / 13 / 2007

Transaction ID: H4-109252

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.63		34.63		69.26

B. Full Name (Last, First, Middle Initial)
Amy Drummond

Mailing Address
104 Roberts Lane #401

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2280407.29

Activity or Event Identifier:
AVD07

Date 04 / 13 / 2007

Transaction ID: H4-109253

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
812.89		812.90		1625.79

C. Full Name (Last, First, Middle Initial)
Andrea E Gottfried

Mailing Address
414 Wynnerwood Road

City State Zip Code
Pelham NY 10803

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2282052.46

Activity or Event Identifier:
AVD07

Date 04 / 13 / 2007

Transaction ID: H4-109254

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
822.58		822.59		1645.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1670.10		1670.12		3340.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Cheryl Gregory			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4551 Sawgrass Ct.			Allocated Activity or Event Year-To-Date 2286254.99																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-109255			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	1	3	/	2	0	0	7																
Alexandria	VA	22312																							
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2101.26		2101.27		4202.53

B. Full Name (Last, First, Middle Initial) Elizabeth Hagen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4212 River Road NW			Allocated Activity or Event Year-To-Date 2286368.97																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-109256			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	1	3	/	2	0	0	7																
Washington	DC	20016																							
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.99		56.99		113.98

C. Full Name (Last, First, Middle Initial) Amie Kershner			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 3114 E. Baltimore			Allocated Activity or Event Year-To-Date 2288749.39																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H4-109257			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	4	/	1	3	/	2	0	0	7																
Baltimore	MD	21224																							
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1190.21		1190.21		2380.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3348.46		3348.47		6696.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Rochelle Sachs Levin

Mailing Address
22800 SW 157th Avenue

City	State	Zip Code
Miami	FL	33170

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2292720.06

Date / /
Transaction ID: H4-109258

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1985.33		1985.34		3970.67

B. Full Name (Last, First, Middle Initial)
Anna Lidman

Mailing Address
37 Brookview Terrace

City	State	Zip Code
Portland	ME	04102

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2295127.97

Date / /
Transaction ID: H4-109259

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1203.95		1203.96		2407.91

C. Full Name (Last, First, Middle Initial)
Sara Little

Mailing Address
1500 Massachusetts Ave., Apt 727

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2296005.64

Date / /
Transaction ID: H4-109260

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
438.83		438.84		877.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3628.11		3628.14		7256.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Judy Loeb Goldfein			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 East 89th Street 6E			Allocated Activity or Event Year-To-Date 2299450.23		
City New York	State NY	Zip Code 10128	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109261		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1722.29		1722.30		3444.59

B. Full Name (Last, First, Middle Initial) Karen McLoughin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4212 River Rd, NW			Allocated Activity or Event Year-To-Date 2299563.21		
City Washington	State DC	Zip Code 20016	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109262		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.49		56.49		112.98

C. Full Name (Last, First, Middle Initial) Colleen Medlock			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14637 Locustwood Lane			Allocated Activity or Event Year-To-Date 2300676.85		
City Silver Spring	State MD	Zip Code 20905	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109263		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
556.82		556.82		1113.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2335.60		2335.61		4671.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Sherry Merfish

Mailing Address
EMILY's List-TX 2720 Pittsburg Street

City State Zip Code
Houston TX 77005

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2304183.06

Activity or Event Identifier:
AVD07

Date 04 / 13 / 2007

Transaction ID: H4-109264

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1753.10		1753.11		3506.21

B. Full Name (Last, First, Middle Initial)
Lindsey O'Connell

Mailing Address
Georgetwon U Village A D202

City State Zip Code
Washington DC 20057

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2304275.41

Activity or Event Identifier:
AVD07

Date 04 / 13 / 2007

Transaction ID: H4-109265

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

C. Full Name (Last, First, Middle Initial)
Amy Padre

Mailing Address
3429 Yuma Street NW Apt 104

City State Zip Code
Washington DC 20008

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2305722.76

Activity or Event Identifier:
AVD07

Date 04 / 13 / 2007

Transaction ID: H4-109266

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
723.67		723.68		1447.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2522.94		2522.97		5045.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Tiffany Reed			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2450 Ontario Rd, NW			Allocated Activity or Event Year-To-Date 2307108.12		
City Washington	State DC	Zip Code 20009	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109267		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
692.68		692.68		1385.36

B. Full Name (Last, First, Middle Initial) Lauren Reznick			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1276 N. Wayne Street Apt 300			Allocated Activity or Event Year-To-Date 2308220.40		
City Arlington	State VA	Zip Code 22201	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109268		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
556.14		556.14		1112.28

C. Full Name (Last, First, Middle Initial) Rebecca Hughes Runyan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1503 30th Street NW Apt 1			Allocated Activity or Event Year-To-Date 2309377.31		
City Washington	State DC	Zip Code 20007	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109269		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
578.45		578.46		1156.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1827.27		1827.28		3654.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Janine Salalac			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4875 Mattos Drive			Allocated Activity or Event Year-To-Date 2310314.28		
City	State	Zip Code	Category/ Type		
Freemont	CA	94536			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109270		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
468.48		468.49		936.97

B. Full Name (Last, First, Middle Initial) Jennifer Sanford			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 802 H Gallop Hill Rd.			Allocated Activity or Event Year-To-Date 2311225.66		
City	State	Zip Code	Category/ Type		
Gaithersburg	MD	20879			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109271		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
455.69		455.69		911.38

C. Full Name (Last, First, Middle Initial) Patricia Seitz			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 617 14th Street, N.E			Allocated Activity or Event Year-To-Date 2312183.33		
City	State	Zip Code	Category/ Type		
Washington	DC	20002			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109272		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
478.83		478.84		957.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1403.00		1403.02		2806.02

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Emily Thomas			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3850 Tunlaw Rd Apt 503			Allocated Activity or Event Year-To-Date 2312272.68		
City State Zip Code Washington DC 20007	Purpose of Disbursement: Salaries		Date <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 04 / 13 / 2007		
Activity or Event Identifier: AVD07			Transaction ID: H4-109273		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.67		44.68		89.35

B. Full Name (Last, First, Middle Initial) Alexis Thorburn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4400 Mass Ave NW Anderson Hall T-03			Allocated Activity or Event Year-To-Date 2312411.20		
City State Zip Code Washington DC 20016	Purpose of Disbursement: Salaries		Date <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 04 / 13 / 2007		
Activity or Event Identifier: AVD07			Transaction ID: H4-109274		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.26		69.26		138.52

C. Full Name (Last, First, Middle Initial) Kaiya Waddell			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7960 Money Rd			Allocated Activity or Event Year-To-Date 2313293.21		
City State Zip Code Napa CA 94558	Purpose of Disbursement: Salaries		Date <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 04 / 13 / 2007		
Activity or Event Identifier: AVD07			Transaction ID: H4-109275		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
441.00		441.01		882.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
554.93		554.95		1109.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Jennifer Williams			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1520 12th Street B			Allocated Activity or Event Year-To-Date 2314924.75		
City State Zip Code Washington DC 20005	Category/ Type		Date <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 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109276		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
815.77		815.77		1631.54

B. Full Name (Last, First, Middle Initial) Patricia Williams			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3 Wyndham Drive			Allocated Activity or Event Year-To-Date 2318836.66		
City State Zip Code Portola Valley CA 94028	Category/ Type		Date <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 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109277		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1955.95		1955.96		3911.91

C. Full Name (Last, First, Middle Initial) Joanne Wilson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3806 Viser Court			Allocated Activity or Event Year-To-Date 2320234.65		
City State Zip Code Bowie MD 20715	Category/ Type		Date <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 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109278		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
698.99		699.00		1397.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3470.71		3470.73		6941.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Adrienne Benson

Mailing Address
2400 16th St NW Apt 607

City State Zip Code
Washington DC 20009

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2320445.56

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109279

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.45		105.46		210.91

B. Full Name (Last, First, Middle Initial)
Jeanne Duncan

Mailing Address
1633 NE Going Street

City State Zip Code
Portland OR 97211

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2323267.39

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109280

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1410.91		1410.92		2821.83

C. Full Name (Last, First, Middle Initial)
Allison Muehlenbeck

Mailing Address
511 Marina Avenue

City State Zip Code
Coronado CA 92118

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2324209.51

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109281

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
471.06		471.06		942.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1987.42		1987.44		3974.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ramona Oliver

Mailing Address
10012 Dallas Avenue

City State Zip Code
Silver Spring MD 20901

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2327209.54

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109282

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1500.01		1500.02		3000.03

B. Full Name (Last, First, Middle Initial)
Jackie Spirer

Mailing Address
3606 T Street NW

City State Zip Code
Washington DC 20007

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2327301.89

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109283

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

C. Full Name (Last, First, Middle Initial)
Channing Ansley

Mailing Address
437 N Street SW

City State Zip Code
Washington DC 20024

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2328602.25

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 13 / 2007

Transaction ID: H4-109284

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
650.18		650.18		1300.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2196.36		2196.38		4392.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Tanya Bjork			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 203 South Paterson Street Suite 400			Allocated Activity or Event Year-To-Date 2331036.50		
City Madison	State WI	Zip Code 53703	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109285		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1217.12		1217.13		2434.25

B. Full Name (Last, First, Middle Initial) Kate Chapek			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1435 N St. NW			Allocated Activity or Event Year-To-Date 2332583.50		
City Washington	State DC	Zip Code 20007	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109286		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
773.50		773.50		1547.00

C. Full Name (Last, First, Middle Initial) Linda Chappetto			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 121 South Hamilton Street Apt M			Allocated Activity or Event Year-To-Date 2334259.83		
City Madison	State WI	Zip Code 53703	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109287		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
838.16		838.17		1676.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2828.78		2828.80		5657.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Kelsey Coday			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 208B Q St. NW			Allocated Activity or Event Year-To-Date 2335262.42																						
City	State	Zip Code	Category/ Type																						
Washington	DC	20001																							
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	3	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109288																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
501.29		501.30		1002.59

B. Full Name (Last, First, Middle Initial) Kathleen Coyne-McCoy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 267 Gleaner Chapel Road			Allocated Activity or Event Year-To-Date 2338010.07																						
City	State	Zip Code	Category/ Type																						
North Scituate	RI	02857																							
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	3	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109289																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1373.82		1373.83		2747.65

C. Full Name (Last, First, Middle Initial) Juanett Davis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2120 4th Ave. Apt #6			Allocated Activity or Event Year-To-Date 2338056.24																						
City	State	Zip Code	Category/ Type																						
Los Angeles	CA	90018																							
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	3	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	3	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109290																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.08		23.09		46.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1898.19		1898.22		3796.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Kellie Dupree			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1644 Florida Ave. N.W.			Allocated Activity or Event Year-To-Date 2339301.45		
City Washington	State DC	Zip Code 20009	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109291		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
622.60		622.61		1245.21

B. Full Name (Last, First, Middle Initial) Maren Hesla			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5515 Little Falls Rd.			Allocated Activity or Event Year-To-Date 2343016.98		
City Arlington	State VA	Zip Code 22207	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109292		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1857.76		1857.77		3715.53

C. Full Name (Last, First, Middle Initial) Ava Jones			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1759 Poplar Lane NW			Allocated Activity or Event Year-To-Date 2343197.68		
City Washington	State DC	Zip Code 20012	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109293		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.35		90.35		180.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2570.71		2570.73		5141.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dana Jones			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 21766 Cypress Valley Terrace			Allocated Activity or Event Year-To-Date 2345749.98		
City Sterling	State VA	Zip Code 20166	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109294		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1276.15		1276.15		2552.30

B. Full Name (Last, First, Middle Initial) Susan Markham			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1402 Emerson Street, NW			Allocated Activity or Event Year-To-Date 2348419.19		
City Washington	State DC	Zip Code 20011	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109295		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1334.60		1334.61		2669.21

C. Full Name (Last, First, Middle Initial) Aisling McDonough			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4403 Woodgate Way			Allocated Activity or Event Year-To-Date 2348550.95		
City Bowie	State MD	Zip Code 20720	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109296		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.88		65.88		131.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2676.63		2676.64		5353.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Anne Meyer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 950 24th Street NW #704			Allocated Activity or Event Year-To-Date 2348687.47		
City Washington	State DC	Zip Code 20052	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109297		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.26		68.26		136.52

B. Full Name (Last, First, Middle Initial) Jonathan B. Parker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2707 Adams Mill Rd. NW #404			Allocated Activity or Event Year-To-Date 2352852.40		
City Washington	State DC	Zip Code 20009	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109298		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2082.46		2082.47		4164.93

C. Full Name (Last, First, Middle Initial) Alexandra Platkin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4240 39th St NW Apt B			Allocated Activity or Event Year-To-Date 2353033.10		
City Washington	State DC	Zip Code 20016	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109299		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.35		90.35		180.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2241.07		2241.08		4482.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Patrick Stanton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 165 Shepard Road			Allocated Activity or Event Year-To-Date 2354079.81		
City	State	Zip Code	Category/ Type		
Braintree	MA	02184			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109300		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
523.35		523.36		1046.71

B. Full Name (Last, First, Middle Initial) Cristina Uribe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4212 26th Street, Unit A			Allocated Activity or Event Year-To-Date 2356617.47		
City	State	Zip Code	Category/ Type		
San Francisco	CA	94131			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109301		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1268.83		1268.83		2537.66

C. Full Name (Last, First, Middle Initial) Peggy Egan Marcy Gallup			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 6			Allocated Activity or Event Year-To-Date 2359154.08		
City	State	Zip Code	Category/ Type		
East Glacier Park	MT	59434			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109302		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1268.30		1268.31		2536.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3060.48		3060.50		6120.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Emily Elbert			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9172 Robin Court			Allocated Activity or Event Year-To-Date 2362140.83		
City	State	Zip Code	Category/Type		
Brentwood	MO	63144			
Purpose of Disbursement: Salaries					
Activity or Event Identifier: AVD07			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/> Transaction ID: H4-109303		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1493.37		1493.38		2986.75

B. Full Name (Last, First, Middle Initial) Chris Esposito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 624 East Broadway			Allocated Activity or Event Year-To-Date 2364969.31		
City	State	Zip Code	Category/Type		
Boston	MA	02127			
Purpose of Disbursement: Salaries					
Activity or Event Identifier: AVD07			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/> Transaction ID: H4-109304		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1414.24		1414.24		2828.48

C. Full Name (Last, First, Middle Initial) Laura Fruge			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 420 Oklahoma Avenue, NE #102			Allocated Activity or Event Year-To-Date 2367292.92		
City	State	Zip Code	Category/Type		
Washington	DC	20002			
Purpose of Disbursement: Salaries					
Activity or Event Identifier: AVD07			Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/> Transaction ID: H4-109305		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1161.80		1161.81		2323.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4069.41		4069.43		8138.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Laura Janoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2521 Pennsylvania Ave. NW			Allocated Activity or Event Year-To-Date 2367431.44		
City Washington	State DC	Zip Code 20037	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109306		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.26		69.26		138.52

B. Full Name (Last, First, Middle Initial) David McGonagle			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4857 Battery Lane Apt 506			Allocated Activity or Event Year-To-Date 2369204.42		
City Bethesda	State MD	Zip Code 20814	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109307		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
886.49		886.49		1772.98

C. Full Name (Last, First, Middle Initial) Martha McKenna			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 913 South Decker Avenue			Allocated Activity or Event Year-To-Date 2371805.59		
City Baltimore	State MD	Zip Code 21224	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109308		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1300.58		1300.59		2601.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2256.33		2256.34		4512.67

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Marissa Smith			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2350 H Street NW #407			Allocated Activity or Event Year-To-Date 2371921.03		
City Washington	State DC	Zip Code 20052	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109309		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.72		57.72		115.44

B. Full Name (Last, First, Middle Initial) Mary Jane Volk			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 541 E. Nelson Avenue			Allocated Activity or Event Year-To-Date 2374183.67		
City Alexandria	State VA	Zip Code 22301	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109310		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1131.32		1131.32		2262.64

C. Full Name (Last, First, Middle Initial) Stacia Young			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4400 Mass Ave NW Hughes Hall 206			Allocated Activity or Event Year-To-Date 2374276.02		
City Washington	State DC	Zip Code 20016	Date MM / DD / YYYY 04 / 13 / 2007		
Purpose of Disbursement: Salaries			Category/Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109311		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1235.21		1235.22		2470.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Lalla Mohib			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 616 E Street N.W. Apt 712			Allocated Activity or Event Year-To-Date 2375441.77																		
City State Zip Code Washington DC 20004	Category/ Type		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	1	3	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Salaries			Transaction ID: H4-109312																		
Activity or Event Identifier: AVD07																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
582.87		582.88		1165.75

B. Full Name (Last, First, Middle Initial) Edna Romero			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 7111 Halleck Street			Allocated Activity or Event Year-To-Date 2376881.30																		
City State Zip Code District Heights MD 20747	Category/ Type		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	1	3	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Salaries			Transaction ID: H4-109313																		
Activity or Event Identifier: AVD07																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
719.76		719.77		1439.53

C. Full Name (Last, First, Middle Initial) Quiyana Washington			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 6974 Hanover Parkway Unit 300			Allocated Activity or Event Year-To-Date 2378683.46																		
City State Zip Code Greenbelt MD 20770	Category/ Type		Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	1	3	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Salaries			Transaction ID: H4-109314																		
Activity or Event Identifier: AVD07																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
901.08		901.08		1802.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2203.71		2203.73		4407.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Yvonne Williams			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5412 Bradford Ct. #231			Allocated Activity or Event Year-To-Date 2380098.33		
City Alexandria	State VA	Zip Code 22311	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109315		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
707.43		707.44		1414.87

B. Full Name (Last, First, Middle Initial) Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3060 Williams Drive #300			Allocated Activity or Event Year-To-Date 2380146.24		
City Fairfax	State VA	Zip Code 22031	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Taxes - Payroll			Transaction ID: H4-109316		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.95		23.96		47.91

C. Full Name (Last, First, Middle Initial) Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3060 Williams Drive #300			Allocated Activity or Event Year-To-Date 2447887.86		
City Fairfax	State VA	Zip Code 22031	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Taxes - Payroll			Transaction ID: H4-109317		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33870.81		33870.81		67741.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34602.19		34602.21		69204.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3060 Williams Drive #300			Allocated Activity or Event Year-To-Date 2448868.36		
City Fairfax	State VA	Zip Code 22031	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Taxes - Payroll			Transaction ID: H4-109318		
Activity or Event Identifier: AVD07			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
490.25		490.25		980.50

B. Full Name (Last, First, Middle Initial) Ha-Hoa Dang			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2741 Woodley Place			Allocated Activity or Event Year-To-Date 2450085.54		
City Falls Church	State VA	Zip Code 22046	Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109319		
Activity or Event Identifier: AVD07			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
608.59		608.59		1217.18

C. Full Name (Last, First, Middle Initial) John Hancock c/o City Bank Delaware			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1615 Brett Road Lock Box 7122			Allocated Activity or Event Year-To-Date 2463448.22		
City New Castle	State DE	Zip Code 19720	Date <input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Employment Pension/ 401(k)			Transaction ID: H4-109320		
Activity or Event Identifier: AVD07			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6681.34		6681.34		13362.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7780.18		7780.18		15560.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Accuvant

Mailing Address
621 17th St Suite 2425

City State Zip Code
Denver CO 80293

Purpose of Disbursement:
Computer Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2467648.22

Activity or Event Identifier:
AVD07

Date 04 / 19 / 2007

Transaction ID: H4-109165

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2100.00		2100.00		4200.00

B. Full Name (Last, First, Middle Initial)
ArchivesOne, Inc.

Mailing Address
PO Box 13005

City State Zip Code
Lewiston ME 04243-9505

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2467814.20

Activity or Event Identifier:
AVD07

Date 04 / 19 / 2007

Transaction ID: H4-109166

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.99		82.99		165.98

C. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address
Payment Center

City State Zip Code
Sacramento CA 95887-0001

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2468732.13

Activity or Event Identifier:
AVD07

Date 04 / 19 / 2007

Transaction ID: H4-109167

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
458.96		458.97		917.93

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2641.95		2641.96		5283.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
AT&T
Mailing Address
Payment Center
City State Zip Code
Sacramento CA 95887-0001
Purpose of Disbursement:
Internet Services
Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
2469320.33
Date 04 / 19 / 2007
Transaction ID: H4-109168

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.10		294.10		588.20

B. Full Name (Last, First, Middle Initial)
SaBrina Brown
Mailing Address
3730 5th St. P.O. Box 1265
City State Zip Code
North Beach MD 20714
Purpose of Disbursement:
Internet Services
Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
2469368.23
Date 04 / 19 / 2007
Transaction ID: H4-109169

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.95		23.95		47.90

C. Full Name (Last, First, Middle Initial)
Campaign Team, Inc. c/o Anna Lidman
Mailing Address
37 Brookview Terrace
City State Zip Code
Portland ME 04102
Purpose of Disbursement:
Copying/Faxing
Activity or Event Identifier:
PSP07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
71129.03
Date 04 / 19 / 2007
Transaction ID: H4-109170

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
325.55		325.55		651.10

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Campaign Team, Inc. c/o Anna Lidman			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Brookview Terrace			Allocated Activity or Event Year-To-Date 71174.03		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>		
Portland	ME	04102			
Purpose of Disbursement: Internet Services			Category/ Type		
Activity or Event Identifier: PSP07			Transaction ID: H4-109171		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.50		22.50		45.00

B. Full Name (Last, First, Middle Initial) Campaign Team, Inc. c/o Anna Lidman			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Brookview Terrace			Allocated Activity or Event Year-To-Date 71289.93		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>		
Portland	ME	04102			
Purpose of Disbursement: Local Transportation			Category/ Type		
Activity or Event Identifier: PSP07			Transaction ID: H4-109172		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.95		57.95		115.90

C. Full Name (Last, First, Middle Initial) Campaign Team, Inc. c/o Anna Lidman			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Brookview Terrace			Allocated Activity or Event Year-To-Date 71374.71		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>		
Portland	ME	04102			
Purpose of Disbursement: Telephone			Category/ Type		
Activity or Event Identifier: PSP07			Transaction ID: H4-109173		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.39		42.39		84.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.84		122.84		245.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Clicks

Mailing Address
320 Ft Duquesne Blvd Suite 300

City State Zip Code
Pittsburg PA 15222

Purpose of Disbursement:
Printing

Category/
Type

Activity or Event Identifier:
PSP07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

71536.42

Date 04 / 19 / 2007

Transaction ID: H4-109194

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.85		80.86		161.71

B. Full Name (Last, First, Middle Initial)
Cogent Communications, Inc.

Mailing Address
P.O. Box 791087

City State Zip Code
Baltimore MD 21279-1087

Purpose of Disbursement:
Internet Services

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2469918.23

Date 04 / 19 / 2007

Transaction ID: H4-109195

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
275.00		275.00		550.00

C. Full Name (Last, First, Middle Initial)
Deer ParkSpring Water Processing Center

Mailing Address
P.O. Box 52271

City State Zip Code
Phoenix AR 85072-2271

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2470240.35

Date 04 / 19 / 2007

Transaction ID: H4-109199

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.06		161.06		322.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
516.91		516.92		1033.83

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Diverse Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 9228 Gaither Road			Allocated Activity or Event Year-To-Date 2470253.35																						
City	State	Zip Code	Category/ Type																						
Gaithersburg	MD	20877																							
Purpose of Disbursement: Office Supplies Expenses			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	9	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	9	/	2	0	0	7																
Activity or Event Identifier: AVD07			Transaction ID: H4-109200																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.50		6.50		13.00

B. Full Name (Last, First, Middle Initial) Federal Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P. O. Box 371461			Allocated Activity or Event Year-To-Date 71568.17																						
City	State	Zip Code	Category/ Type																						
Pittsburg	PA	15250-7461																							
Purpose of Disbursement: Deliveries			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	9	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	9	/	2	0	0	7																
Activity or Event Identifier: PSP07			Transaction ID: H4-109201																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.87		15.88		31.75

C. Full Name (Last, First, Middle Initial) Judy Loeb Goldfein			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 50 East 89th Street 6E			Allocated Activity or Event Year-To-Date 71773.07																						
City	State	Zip Code	Category/ Type																						
New York	NY	10128																							
Purpose of Disbursement: Office Supplies Expenses			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	9	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	9	/	2	0	0	7																
Activity or Event Identifier: PSP07 See Attached Memo Entry			Transaction ID: H4-109202																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.45		102.45		204.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
124.82		124.83		249.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ray Keating

Mailing Address
816 Lucky Rd

City State Zip Code
Severn MD 21144

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2470291.35

Activity or Event Identifier:
AVD07

See Attached Memo Entry

Date MM / DD / YYYY
04 / 19 / 2007

Transaction ID: H4-109209

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.00		19.00		38.00

B. Full Name (Last, First, Middle Initial)
Metro Computer Supplies

Mailing Address
1200 18th Street, NW Suite LL101

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2471895.73

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 19 / 2007

Transaction ID: H4-109210

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
802.19		802.19		1604.38

C. Full Name (Last, First, Middle Initial)
Sirus Consulting, Inc.

Mailing Address
7550 Southwest 4th Street

City State Zip Code
Plantation FL 33317

Purpose of Disbursement:
Consulting Fundraising

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

72298.07

Activity or Event Identifier:
PSP07

Date MM / DD / YYYY
04 / 19 / 2007

Transaction ID: H4-109224

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
262.50		262.50		525.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1083.69		1083.69		2167.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1100			Allocated Activity or Event Year-To-Date 72384.80		
City Albany	State NY	Zip Code 12250-0001	Date MM / DD / YYYY 04 / 19 / 2007		
Purpose of Disbursement: Telephone			Transaction ID: H4-109229		
Activity or Event Identifier: PSP07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.36		43.37		86.73

B. Full Name (Last, First, Middle Initial) Working Assets			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2041			Allocated Activity or Event Year-To-Date 2471902.73		
City Mechanicsburg	State PA	Zip Code 17055	Date MM / DD / YYYY 04 / 19 / 2007		
Purpose of Disbursement: Telephone			Transaction ID: H4-109232		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.50		3.50		7.00

C. Full Name (Last, First, Middle Initial) Capitol Morning Report			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 925 L Street Suite 325			Allocated Activity or Event Year-To-Date 2472526.73		
City Sacramento	State CA	Zip Code 95814	Date MM / DD / YYYY 04 / 19 / 2007		
Purpose of Disbursement: Publication & Dues			Transaction ID: H4-109233		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
312.00		312.00		624.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
358.86		358.87		717.73

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
MacWilliams, Robinson & Partners, Inc.

Mailing Address
1660 L Street, NW Suite 301

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:
Radio Refund

Activity or Event Identifier:
MO RADIO
(Sch.E)[Federal Memo]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
-9868.50

Date / /
Transaction ID: H4-109238

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-4934.25		-4934.25		-9868.50

B. Full Name (Last, First, Middle Initial)
MacWilliams, Robinson & Partners, Inc.

Mailing Address
1660 L Street, NW Suite 301

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:
Radio Refund

Activity or Event Identifier:
MO RADIO
(Sch.E)[Federal Memo]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
-10935.44

Date / /
Transaction ID: H4-109239

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-533.47		-533.47		-1066.94

C. Full Name (Last, First, Middle Initial)
100 Spear Street Owners' Corp

Mailing Address
PO Box 10297

City	State	Zip Code
Newark	NJ	07193-0297

Purpose of Disbursement:
Rent

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2479247.58

Date / /
Transaction ID: H4-109361

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3360.42		3360.43		6720.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3360.42		-2107.29		1253.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jack I. Bender & Sons

Mailing Address
1120 Connecticut Ave, NW Suite 1200

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2545264.24

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 26 / 2007

Transaction ID: H4-109362

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33008.33		33008.33		66016.66

B. Full Name (Last, First, Middle Initial)
Jack I. Bender & Sons

Mailing Address
1120 Connecticut Ave, NW Suite 1200

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Repairs Maintainence

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2545833.03

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 26 / 2007

Transaction ID: H4-109364

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
284.39		284.40		568.79

C. Full Name (Last, First, Middle Initial)
Mary Beth Cahill

Mailing Address
4800 Dexter Street, NW

City State Zip Code
Washington DC 20007

Purpose of Disbursement:
Strategic Consulting

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2555833.03

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 26 / 2007

Transaction ID: H4-109368

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5000.00		5000.00		10000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38292.72		38292.73		76585.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Colonial Parking, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1050 Thomas Jefferson St., #100			Allocated Activity or Event Year-To-Date 2557303.03		
City	State	Zip Code	Category/Type		
Washington	DC	20007			
Purpose of Disbursement: Parking Fees			Date		
Activity or Event Identifier: AVD07			M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Transaction ID: H4-109402		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
735.00		735.00		1470.00

B. Full Name (Last, First, Middle Initial) Diverse Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9228 Gaither Road			Allocated Activity or Event Year-To-Date 2557322.05		
City	State	Zip Code	Category/Type		
Gaithersburg	MD	20877			
Purpose of Disbursement: Office Supplies Expenses			Date		
Activity or Event Identifier: AVD07			M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Transaction ID: H4-109404		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.51		9.51		19.02

C. Full Name (Last, First, Middle Initial) Judy Loeb Goldfein			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 East 89th Street 6E			Allocated Activity or Event Year-To-Date 2558522.05		
City	State	Zip Code	Category/Type		
New York	NY	10128			
Purpose of Disbursement: Rent			Date		
Activity or Event Identifier: AVD07 See Attached Memo Entry			M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Transaction ID: H4-109407		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
600.00		600.00		1200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1344.51		1344.51		2689.02

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Grassroots Solutions Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2929 University Avenue Suite #100			Allocated Activity or Event Year-To-Date 2558550.45		
City St. Paul	State MN	Zip Code 55414	Date <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 0 4 / 2 6 / 2 0 0 7		
Purpose of Disbursement: Telephone			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109408		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.20		14.20		28.40

B. Full Name (Last, First, Middle Initial) Grassroots Solutions Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2929 University Avenue Suite #100			Allocated Activity or Event Year-To-Date 2558552.95		
City St. Paul	State MN	Zip Code 55414	Date <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 0 4 / 2 6 / 2 0 0 7		
Purpose of Disbursement: Internet Services			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109409		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.25		1.25		2.50

C. Full Name (Last, First, Middle Initial) Grassroots Solutions Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2929 University Avenue Suite #100			Allocated Activity or Event Year-To-Date 2558623.16		
City St. Paul	State MN	Zip Code 55414	Date <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 0 4 / 2 6 / 2 0 0 7		
Purpose of Disbursement: Telephone			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109410		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.10		35.11		70.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.55		50.56		101.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Grassroots Solutions Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2929 University Avenue Suite #100			Allocated Activity or Event Year-To-Date 2558694.60		
City St. Paul	State MN	Zip Code 55414	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Copying/Faxing			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109411		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.72		35.72		71.44

B. Full Name (Last, First, Middle Initial) Grassroots Solutions Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2929 University Avenue Suite #100			Allocated Activity or Event Year-To-Date 2558719.43		
City St. Paul	State MN	Zip Code 55414	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Telephone			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109412		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.41		12.42		24.83

C. Full Name (Last, First, Middle Initial) Grassroots Solutions Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2929 University Avenue Suite #100			Allocated Activity or Event Year-To-Date 2560126.52		
City St. Paul	State MN	Zip Code 55414	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Travel/Accommodation /Meals			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109413		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
703.54		703.55		1407.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
751.67		751.69		1503.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Amy Green			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1405 30th Street, NW			Allocated Activity or Event Year-To-Date 2576126.52		
City Washington	State DC	Zip Code 20007	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Strategic Consulting			Category/Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109414		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8000.00		8000.00		16000.00

B. Full Name (Last, First, Middle Initial) The Guardian			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 95101			Allocated Activity or Event Year-To-Date 2602794.22		
City Chicago	State IL	Zip Code 60694-5101	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Insurance Health/Life			Category/Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109415		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13333.85		13333.85		26667.70

C. Full Name (Last, First, Middle Initial) The Guardian			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 95101			Allocated Activity or Event Year-To-Date 2611956.90		
City Chicago	State IL	Zip Code 60694-5101	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Insurance Health/Life			Category/Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109416		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4581.34		4581.34		9162.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25915.19		25915.19		51830.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) The Guardian			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 95101			Allocated Activity or Event Year-To-Date 2612047.28		
City Chicago	State IL	Zip Code 60694-5101	Date <input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Insurance Health/Life			Transaction ID: H4-109417		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.19		45.19		90.38

B. Full Name (Last, First, Middle Initial) Maren Hesla			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5515 Little Falls Rd.			Allocated Activity or Event Year-To-Date 2612107.28		
City Arlington	State VA	Zip Code 22207	Date <input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109418		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.00		30.00		60.00

C. Full Name (Last, First, Middle Initial) JIB Monitoring Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1120 Connecticut Avenue, NW Suite 1200			Allocated Activity or Event Year-To-Date 2612343.55		
City Washington	State DC	Zip Code 20036	Date <input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Building Utilities & Fees			Transaction ID: H4-109421		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.13		118.14		236.27

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
193.32		193.33		386.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) JIB Monitoring Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1120 Connecticut Avenue, NW Suite 1200			Allocated Activity or Event Year-To-Date 2612393.55		
City Washington	State DC	Zip Code 20036	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Building Utilities & Fees			Transaction ID: H4-109422		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.00		25.00		50.00

B. Full Name (Last, First, Middle Initial) Rochelle Sachs Levin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 22800 SW 157th Avenue			Allocated Activity or Event Year-To-Date 2613393.55		
City Miami	State FL	Zip Code 33170	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Rent			Transaction ID: H4-109423		
Activity or Event Identifier: See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

C. Full Name (Last, First, Middle Initial) Susan Markham			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1402 Emerson Street, NW			Allocated Activity or Event Year-To-Date 2613446.55		
City Washington	State DC	Zip Code 20011	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109424		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.50		26.50		53.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
551.50		551.50		1103.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address EMILY's List-TX 2720 Pittsburg Street			Allocated Activity or Event Year-To-Date 72434.80		
City State Zip Code Houston TX 77005	Category/ Type		Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Telephone			Transaction ID: H4-109425		
Activity or Event Identifier: PSP07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.00		25.00		50.00

B. Full Name (Last, First, Middle Initial) Gerald Merfish			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 15879			Allocated Activity or Event Year-To-Date 2614446.55		
City State Zip Code Houston TX 77220-5879	Category/ Type		Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Rent			Transaction ID: H4-109427		
Activity or Event Identifier: AVD07 See Attached Memo Entry					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

C. Full Name (Last, First, Middle Initial) Edna Romero			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7111 Halleck Street			Allocated Activity or Event Year-To-Date 2614496.55		
City State Zip Code District Heights MD 20747	Category/ Type		Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109439		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.00		25.00		50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
550.00		550.00		1100.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address Dept DC 85105 PO Box 30851			Allocated Activity or Event Year-To-Date 2616693.26																		
City Hartford	State CT	Zip Code 06150-0851	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>6</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	2	6	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
2	6																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Computer Supplies/Hardware			Category/ Type																		
Activity or Event Identifier: AVD07			Transaction ID: H4-109441																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1098.35		1098.36		2196.71

B. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address Dept DC 85105 PO Box 30851			Allocated Activity or Event Year-To-Date 2616801.56																		
City Hartford	State CT	Zip Code 06150-0851	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>6</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	2	6	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
2	6																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Office Supplies Expenses			Category/ Type																		
Activity or Event Identifier: AVD07			Transaction ID: H4-109442																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.15		54.15		108.30

C. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address Dept DC 85105 PO Box 30851			Allocated Activity or Event Year-To-Date 72536.28																		
City Hartford	State CT	Zip Code 06150-0851	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>6</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	2	6	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
2	6																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Office Supplies Expenses			Category/ Type																		
Activity or Event Identifier: PSP07			Transaction ID: H4-109443																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.74		50.74		101.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1203.24		1203.25		2406.49

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Gail Stoltz			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 198 F St, SE			Allocated Activity or Event Year-To-Date 2619601.56		
City Washington	State DC	Zip Code 20003	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Strategic Consulting			Transaction ID: H4-109446		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1400.00		1400.00		2800.00

B. Full Name (Last, First, Middle Initial) United Parcel Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 7247-0244			Allocated Activity or Event Year-To-Date 2619682.53		
City Philadelphia	State PA	Zip Code 19170-0001	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Deliveries			Transaction ID: H4-109447		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.48		40.49		80.97

C. Full Name (Last, First, Middle Initial) United Parcel Service			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 7247-0244			Allocated Activity or Event Year-To-Date 72608.71		
City Philadelphia	State PA	Zip Code 19170-0001	Date MM / DD / YYYY 04 / 26 / 2007		
Purpose of Disbursement: Deliveries			Transaction ID: H4-109448		
Activity or Event Identifier: PSP07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.21		36.22		72.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1476.69		1476.71		2953.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 1			Allocated Activity or Event Year-To-Date 2619775.60																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	2	6	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	2	6	/	2	0	0	7																
Worcester	MA	01654	Transaction ID: H4-109451																						
Purpose of Disbursement: Telephone			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.53		46.54		93.07

B. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 25506			Allocated Activity or Event Year-To-Date 2619825.87																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	2	6	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	2	6	/	2	0	0	7																
Lehigh Valley	PA	18002-5506	Transaction ID: H4-109452																						
Purpose of Disbursement: Telephone			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.13		25.14		50.27

C. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 489			Allocated Activity or Event Year-To-Date 2619946.13																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	2	6	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	2	6	/	2	0	0	7																
Newark	NJ	07101-0489	Transaction ID: H4-109453																						
Purpose of Disbursement: Telephone			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.13		60.13		120.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.79		131.81		263.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Wisconsin Dept of Revenue

Mailing Address
PO Box 8981

City State Zip Code
Madison WI 53708-8981

Purpose of Disbursement:
Publication & Dues

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2619956.13

Activity or Event Identifier:
AVD07

Date 04 / 26 / 2007

Transaction ID: H4-109454

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.00		5.00		10.00

B. Full Name (Last, First, Middle Initial)
Patricia Williams

Mailing Address
3 Wyndham Drive

City State Zip Code
Portola Valley CA 94028

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

72640.13

Activity or Event Identifier:
PSP07

Date 04 / 26 / 2007

Transaction ID: H4-109455

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.71		15.71		31.42

C. Full Name (Last, First, Middle Initial)
Patricia Williams

Mailing Address
3 Wyndham Drive

City State Zip Code
Portola Valley CA 94028

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

72754.77

Activity or Event Identifier:
PSP07

Date 04 / 26 / 2007

Transaction ID: H4-109456

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.32		57.32		114.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.03		78.03		156.06

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)
Cathleen Costello

Mailing Address
1308 Forest Glen Dr. South

City State Zip Code
Winnetka IL 60093

Purpose of Disbursement:
Consulting Fundraising

Category/
Type

Activity or Event Identifier:
PSP07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

77754.77

Date 04 / 26 / 2007

Transaction ID: H4-109459

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2500.00		2500.00		5000.00

B. Full Name (Last, First, Middle Initial)
Amy Zellerbach

Mailing Address
1168 Greenwich St #2

City State Zip Code
San Francisco CA 94109

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2622115.30

Date 04 / 30 / 2007

Transaction ID: H4-109538

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1079.58		1079.59		2159.17

C. Full Name (Last, First, Middle Initial)
Amanda Bogden

Mailing Address
1770 Columbia Rd. NW

City State Zip Code
Washington DC 20009

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2623351.80

Date 04 / 30 / 2007

Transaction ID: H4-109460

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
618.25		618.25		1236.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4197.83		4197.84		8395.67

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) SaBrina Brown			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 3730 5th St. P.O. Box 1265			Allocated Activity or Event Year-To-Date 2626164.35																		
City	State	Zip Code	Category/ Type																		
North Beach	MD	20714																			
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Activity or Event Identifier: AVD07			Transaction ID: H4-109461																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1406.27		1406.28		2812.55

B. Full Name (Last, First, Middle Initial) Lesbia Cajchun			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 2902 Kings Chapel Rd, #7			Allocated Activity or Event Year-To-Date 2627834.46																		
City	State	Zip Code	Category/ Type																		
Falls Church	VA	22042																			
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Activity or Event Identifier: AVD07			Transaction ID: H4-109462																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
835.05		835.06		1670.11

C. Full Name (Last, First, Middle Initial) Kimberly Coleman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 1765 Swann St, NW #1			Allocated Activity or Event Year-To-Date 2629150.54																		
City	State	Zip Code	Category/ Type																		
Washington	DC	20009																			
Purpose of Disbursement: Salaries			Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <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>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Activity or Event Identifier: AVD07			Transaction ID: H4-109463																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
658.04		658.04		1316.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2899.36		2899.38		5798.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Caroline Fines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10621 Regent Park Court			Allocated Activity or Event Year-To-Date 2631285.80		
City	State	Zip Code	Category/ Type		
Fairfax	VA	22030			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109464		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1067.63		1067.63		2135.26

B. Full Name (Last, First, Middle Initial) Ray Keating			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 816 Lucky Rd			Allocated Activity or Event Year-To-Date 2633505.32		
City	State	Zip Code	Category/ Type		
Severn	MD	21144			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109465		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1109.76		1109.76		2219.52

C. Full Name (Last, First, Middle Initial) Britt Cocanour			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6606 Allegheny Ave			Allocated Activity or Event Year-To-Date 2636953.05		
City	State	Zip Code	Category/ Type		
Takoma Park	MD	20912			
Purpose of Disbursement: Salaries			Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Activity or Event Identifier: AVD07			Transaction ID: H4-109466		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1723.86		1723.87		3447.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3901.25		3901.26		7802.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ellen L Moran			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8220 Custer Rd			Allocated Activity or Event Year-To-Date 2641662.55		
City Bethesda	State MD	Zip Code 20817	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109468		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2354.75		2354.75		4709.50

B. Full Name (Last, First, Middle Initial) Lisa Robillard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4326 South 36th Street			Allocated Activity or Event Year-To-Date 2643275.52		
City Arlington	State VA	Zip Code 22206	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109469		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
806.48		806.49		1612.97

C. Full Name (Last, First, Middle Initial) Jessica Aune			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 117 Bromley Park Lane			Allocated Activity or Event Year-To-Date 2643367.87		
City Franklin	State TN	Zip Code 37069	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109470		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3207.40		3207.42		6414.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Lauren Caselli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address LXR Hall 410 Georgetown University			Allocated Activity or Event Year-To-Date 2643437.13																		
City	State	Zip Code	Category/ Type																		
Washington	DC	20057																			
Purpose of Disbursement: Salaries			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Activity or Event Identifier: AVD07			Transaction ID: H4-109471																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.63		34.63		69.26

B. Full Name (Last, First, Middle Initial) Ha-Hoa Dang			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 2741 Woodley Place			Allocated Activity or Event Year-To-Date 2644654.31																		
City	State	Zip Code	Category/ Type																		
Falls Church	VA	22046																			
Purpose of Disbursement: Salaries			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Activity or Event Identifier: AVD07			Transaction ID: H4-109472																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
608.59		608.59		1217.18

C. Full Name (Last, First, Middle Initial) Amy Drummond			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 104 Roberts Lane #401			Allocated Activity or Event Year-To-Date 2646280.10																		
City	State	Zip Code	Category/ Type																		
Alexandria	VA	22314																			
Purpose of Disbursement: Salaries			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Activity or Event Identifier: AVD07			Transaction ID: H4-109473																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
812.89		812.90		1625.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1456.11		1456.12		2912.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Andrea E Gottfried

Mailing Address
414 Wynnerwood Road

City State Zip Code
Pelham NY 10803

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2647925.27

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109474

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
822.58		822.59		1645.17

B. Full Name (Last, First, Middle Initial)
Cheryl Gregory

Mailing Address
4551 Sawgrass Ct.

City State Zip Code
Alexandria VA 22312

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2652127.80

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109475

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2101.26		2101.27		4202.53

C. Full Name (Last, First, Middle Initial)
Elizabeth Hagen

Mailing Address
4212 River Road NW

City State Zip Code
Washington DC 20016

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2652241.78

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109476

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.99		56.99		113.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2980.83		2980.85		5961.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Amie Kershner

Mailing Address
3114 E. Baltimore

City State Zip Code
Baltimore MD 21224

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2654622.20

Date 04 / 30 / 2007

Transaction ID: H4-109477

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1190.21		1190.21		2380.42

B. Full Name (Last, First, Middle Initial)
Rochelle Sachs Levin

Mailing Address
22800 SW 157th Avenue

City State Zip Code
Miami FL 33170

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2658592.87

Date 04 / 30 / 2007

Transaction ID: H4-109478

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1985.33		1985.34		3970.67

C. Full Name (Last, First, Middle Initial)
Anna Lidman

Mailing Address
37 Brookview Terrace

City State Zip Code
Portland ME 04102

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2661000.78

Date 04 / 30 / 2007

Transaction ID: H4-109479

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1203.95		1203.96		2407.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4379.49		4379.51		8759.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Sara Little			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1500 Massachusetts Ave., NW # 727			Allocated Activity or Event Year-To-Date 2661878.45																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	3	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	3	0	/	2	0	0	7																
Washington	DC	20005	Transaction ID: H4-109480																						
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
438.83		438.84		877.67

B. Full Name (Last, First, Middle Initial) Judy Loeb Goldfein			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 50 East 89th Street 6E			Allocated Activity or Event Year-To-Date 2665323.04																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	3	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	3	0	/	2	0	0	7																
New York	NY	10128	Transaction ID: H4-109481																						
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1722.29		1722.30		3444.59

C. Full Name (Last, First, Middle Initial) Karen McLoughin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4212 River Rd, NW			Allocated Activity or Event Year-To-Date 2665436.02																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	3	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	3	0	/	2	0	0	7																
Washington	DC	20016	Transaction ID: H4-109482																						
Purpose of Disbursement: Salaries			Category/ Type																						
Activity or Event Identifier: AVD07																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.49		56.49		112.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2217.61		2217.63		4435.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Sherry Merfish			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address EMILY's List-TX 2720 Pittsburg Street			Allocated Activity or Event Year-To-Date 2668942.23																		
City State Zip Code Houston TX 77005	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Salaries			Transaction ID: H4-109484																		
Activity or Event Identifier: AVD07																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1753.10		1753.11		3506.21

B. Full Name (Last, First, Middle Initial) Lindsey O'Connell			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address Georgetwon U Village A D202			Allocated Activity or Event Year-To-Date 2669034.58																		
City State Zip Code Washington DC 20057	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Salaries			Transaction ID: H4-109485																		
Activity or Event Identifier: AVD07																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

C. Full Name (Last, First, Middle Initial) Amy Padre			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 3429 Yuma Street NW Apt 104			Allocated Activity or Event Year-To-Date 2670481.93																		
City State Zip Code Washington DC 20008	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>			M	M	0	4	D	D	3	0	Y	Y	Y	Y	2	0	0	7
M	M																				
0	4																				
D	D																				
3	0																				
Y	Y	Y	Y																		
2	0	0	7																		
Purpose of Disbursement: Salaries			Transaction ID: H4-109486																		
Activity or Event Identifier: AVD07																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
723.67		723.68		1447.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2522.94		2522.97		5045.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Tiffany Reed

Mailing Address
2450 Ontario Rd, NW

City State Zip Code
Washington DC 20009

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2671867.29

Date 04 / 30 / 2007

Transaction ID: H4-109487

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
692.68		692.68		1385.36

B. Full Name (Last, First, Middle Initial)
Rebecca Hughes Runyan

Mailing Address
1503 30th Street NW Apt 1

City State Zip Code
Washington DC 20007

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2673024.20

Date 04 / 30 / 2007

Transaction ID: H4-109489

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
578.45		578.46		1156.91

C. Full Name (Last, First, Middle Initial)
Janine Salalac

Mailing Address
4875 Mattos Drive

City State Zip Code
Freemont CA 94536

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2673961.17

Date 04 / 30 / 2007

Transaction ID: H4-109490

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
468.48		468.49		936.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1739.61		1739.63		3479.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jennifer Sanford

Mailing Address
802 H Gallop Hill Rd.

City	State	Zip Code
Gaithersburg	MD	20879

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2674872.55

Activity or Event Identifier:
AVD07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	7

Transaction ID: H4-109491

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
455.69		455.69		911.38

B. Full Name (Last, First, Middle Initial)
Patricia Seitz

Mailing Address
617 14th Street, N.E

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2675830.22

Activity or Event Identifier:
AVD07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	7

Transaction ID: H4-109492

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
478.83		478.84		957.67

C. Full Name (Last, First, Middle Initial)
Emily Thomas

Mailing Address
3850 Tunlaw Rd Apt 503

City	State	Zip Code
Washington	DC	20007

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2675919.57

Activity or Event Identifier:
AVD07

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	7

Transaction ID: H4-109493

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.67		44.68		89.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
979.19		979.21		1958.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Alexis Thorburn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4400 Mass Ave NW Anderson Hall T-03			Allocated Activity or Event Year-To-Date 2676058.09		
City State Zip Code Washington DC 20016	Category/ Type		Date <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 04 / 30 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109494		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.26		69.26		138.52

B. Full Name (Last, First, Middle Initial) Kaiya Waddell			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7960 Money Rd			Allocated Activity or Event Year-To-Date 2676940.10		
City State Zip Code Napa CA 94558	Category/ Type		Date <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 04 / 30 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109495		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
441.00		441.01		882.01

C. Full Name (Last, First, Middle Initial) Jennifer Williams			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1520 12th Street B			Allocated Activity or Event Year-To-Date 2678571.64		
City State Zip Code Washington DC 20005	Category/ Type		Date <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 04 / 30 / 2007		
Purpose of Disbursement: Salaries			Transaction ID: H4-109496		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
815.77		815.77		1631.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1326.03		1326.04		2652.07

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Patricia Williams

Mailing Address
3 Wyndham Drive

City State Zip Code
Portola Valley CA 94028

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2682483.55

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109497

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1955.95		1955.96		3911.91

B. Full Name (Last, First, Middle Initial)
Joanne Wilson

Mailing Address
3806 Viser Court

City State Zip Code
Bowie MD 20715

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2683881.54

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109498

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
698.99		699.00		1397.99

C. Full Name (Last, First, Middle Initial)
Adrienne Benson

Mailing Address
2400 16th St NW Apt 607

City State Zip Code
Washington DC 20009

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2684092.45

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109499

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.45		105.46		210.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2760.39		2760.42		5520.81

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Jeanne Duncan

Mailing Address
1633 NE Going Street

City State Zip Code
Portland OR 97211

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2686914.28

Date 04 / 30 / 2007

Transaction ID: H4-109500

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1410.91		1410.92		2821.83

B. Full Name (Last, First, Middle Initial)
Allison Muehlenbeck

Mailing Address
511 Marina Avenue

City State Zip Code
Coronado CA 92118

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2687856.40

Date 04 / 30 / 2007

Transaction ID: H4-109501

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
471.06		471.06		942.12

C. Full Name (Last, First, Middle Initial)
Ramona Oliver

Mailing Address
10012 Dallas Avenue

City State Zip Code
Silver Spring MD 20901

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2690856.43

Date 04 / 30 / 2007

Transaction ID: H4-109502

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1500.01		1500.02		3000.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3381.98		3382.00		6763.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Jackie Spirer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3606 T Street NW			Allocated Activity or Event Year-To-Date 2690948.78		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Washington	DC	20007			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109503		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

B. Full Name (Last, First, Middle Initial) Channing Ansley			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 437 N Street SW			Allocated Activity or Event Year-To-Date 2692249.14		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Washington	DC	20024			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109504		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
650.18		650.18		1300.36

C. Full Name (Last, First, Middle Initial) Tanya Bjork			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 203 South Paterson Street Suite 400			Allocated Activity or Event Year-To-Date 2694683.39		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Madison	WI	53703			
Purpose of Disbursement: Salaries			Category/ Type		
Activity or Event Identifier: AVD07			Transaction ID: H4-109505		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1217.12		1217.13		2434.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1913.47		1913.49		3826.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial)
Matthew Burgess

Mailing Address
3221 Connecticut Ave NW #506

City State Zip Code
Washington DC 20008

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2696700.50

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109506

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1008.55		1008.56		2017.11

B. Full Name (Last, First, Middle Initial)
Kate Chapek

Mailing Address
1435 N St. NW

City State Zip Code
Washington DC 20007

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2698247.50

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109507

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
773.50		773.50		1547.00

C. Full Name (Last, First, Middle Initial)
Linda Chappetto

Mailing Address
121 South Hamilton Street Apt M

City State Zip Code
Madison WI 53703

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2699923.83

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109508

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
838.16		838.17		1676.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2620.21		2620.23		5240.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Kelsey Coday

Mailing Address
208B Q St. NW

City State Zip Code
Washington DC 20001

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2700926.42

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109509

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
501.29		501.30		1002.59

B. Full Name (Last, First, Middle Initial)
Kathleen Coyne-McCoy

Mailing Address
267 Gleaner Chapel Road

City State Zip Code
North Scituate RI 02857

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2703674.07

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109510

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1373.82		1373.83		2747.65

C. Full Name (Last, First, Middle Initial)
Juanett Davis

Mailing Address
2120 4th Ave. Apt #6

City State Zip Code
Los Angeles CA 90018

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2703720.24

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109511

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.08		23.09		46.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1898.19		1898.22		3796.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Kellie Dupree

Mailing Address
1644 Florida Ave. N.W.

City Washington	State DC	Zip Code 20009	Category/ Type
Purpose of Disbursement: Salaries			

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2704965.45

Date / /
Transaction ID: H4-109512

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
622.60		622.61		1245.21

B. Full Name (Last, First, Middle Initial)
Maren Hesla

Mailing Address
5515 Little Falls Rd.

City Arlington	State VA	Zip Code 22207	Category/ Type
Purpose of Disbursement: Salaries			

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2708680.98

Date / /
Transaction ID: H4-109513

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1857.76		1857.77		3715.53

C. Full Name (Last, First, Middle Initial)
Ava Jones

Mailing Address
1759 Poplar Lane NW

City Washington	State DC	Zip Code 20012	Category/ Type
Purpose of Disbursement: Salaries			

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2708861.68

Date / /
Transaction ID: H4-109514

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.35		90.35		180.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2570.71		2570.73		5141.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dana Jones

Mailing Address
21766 Cypress Valley Terrace

City State Zip Code
Sterling VA 20166

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2711413.98

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109515

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1276.15		1276.15		2552.30

B. Full Name (Last, First, Middle Initial)
Susan Markham

Mailing Address
1402 Emerson Street, NW

City State Zip Code
Washington DC 20011

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2714083.19

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109516

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1334.60		1334.61		2669.21

C. Full Name (Last, First, Middle Initial)
Aisling McDonough

Mailing Address
4403 Woodgate Way

City State Zip Code
Bowie MD 20720

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2714214.95

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109517

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.88		65.88		131.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2676.63		2676.64		5353.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Anne Meyer

Mailing Address
950 24th Street NW #704

City State Zip Code
Washington DC 20052

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2714351.47

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109518

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.26		68.26		136.52

B. Full Name (Last, First, Middle Initial)
Jonathan B. Parker

Mailing Address
2707 Adams Mill Rd. NW #404

City State Zip Code
Washington DC 20009

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2718516.40

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109519

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2082.46		2082.47		4164.93

C. Full Name (Last, First, Middle Initial)
Alexandra Platkin

Mailing Address
4240 39th St NW Apt B

City State Zip Code
Washington DC 20016

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2718697.10

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109520

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.35		90.35		180.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2241.07		2241.08		4482.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Patrick Stanton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 165 Shepard Road			Allocated Activity or Event Year-To-Date 2719743.81		
City Braintree	State MA	Zip Code 02184	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109521		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="523.35"/>		<input type="text" value="523.36"/>		<input type="text" value="1046.71"/>

B. Full Name (Last, First, Middle Initial) Michelle Stephenson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9638 Twin Lakes Avenue			Allocated Activity or Event Year-To-Date 2720564.99		
City Marion	State MI	Zip Code 49665	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109522		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="410.59"/>		<input type="text" value="410.59"/>		<input type="text" value="821.18"/>

C. Full Name (Last, First, Middle Initial) Cristina Uribe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4212 26th Street, Unit A			Allocated Activity or Event Year-To-Date 2723102.49		
City San Francisco	State CA	Zip Code 94131	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109523		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1268.75"/>		<input type="text" value="1268.75"/>		<input type="text" value="2537.50"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2202.69"/>		<input type="text" value="2202.70"/>		<input type="text" value="4405.39"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Peggy Egan Marcy Gallup			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 6			Allocated Activity or Event Year-To-Date 2725639.10		
City East Glacier Park	State MT	Zip Code 59434	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109524		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1268.30		1268.31		2536.61

B. Full Name (Last, First, Middle Initial) Emily Elbert			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9172 Robin Court			Allocated Activity or Event Year-To-Date 2728148.57		
City Brentwood	State MO	Zip Code 63144	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109525		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1254.73		1254.74		2509.47

C. Full Name (Last, First, Middle Initial) Chris Esposito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 624 East Broadway			Allocated Activity or Event Year-To-Date 2730972.63		
City Boston	State MA	Zip Code 02127	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109526		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1412.03		1412.03		2824.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3935.06		3935.08		7870.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Laura Fruge

Mailing Address
420 Oklahoma Avenue, NE #102

City State Zip Code
Washington DC 20002

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2733296.24

Activity or Event Identifier:
AVD07

Date 04 / 30 / 2007

Transaction ID: H4-109527

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1161.80		1161.81		2323.61

B. Full Name (Last, First, Middle Initial)
Laura Janoff

Mailing Address
2521 Pennsylvania Ave. NW

City State Zip Code
Washington DC 20037

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2733434.76

Activity or Event Identifier:
AVD07

Date 04 / 30 / 2007

Transaction ID: H4-109528

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.26		69.26		138.52

C. Full Name (Last, First, Middle Initial)
David McGonagle

Mailing Address
4857 Battery Lane Apt 506

City State Zip Code
Bethesda MD 20814

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2735207.74

Activity or Event Identifier:
AVD07

Date 04 / 30 / 2007

Transaction ID: H4-109529

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
886.49		886.49		1772.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2117.55		2117.56		4235.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Martha McKenna

Mailing Address
913 South Decker Avenue

City State Zip Code
Baltimore MD 21224

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2737808.91

Date 04 / 30 / 2007

Transaction ID: H4-109530

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1300.58		1300.59		2601.17

B. Full Name (Last, First, Middle Initial)
Marissa Smith

Mailing Address
2350 H Street NW #407

City State Zip Code
Washington DC 20052

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2737924.35

Date 04 / 30 / 2007

Transaction ID: H4-109531

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.72		57.72		115.44

C. Full Name (Last, First, Middle Initial)
Mary Jane Volk

Mailing Address
541 E. Nelson Avenue

City State Zip Code
Alexandria VA 22301

Purpose of Disbursement:
Salaries

Category/
Type

Activity or Event Identifier:
AVD07

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2740186.99

Date 04 / 30 / 2007

Transaction ID: H4-109532

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1131.32		1131.32		2262.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2489.62		2489.63		4979.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Stacia Young

Mailing Address
4400 Mass Ave NW Hughes Hall 206

City State Zip Code
Washington DC 20016

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2740279.34

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109533

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.17		46.18		92.35

B. Full Name (Last, First, Middle Initial)
Laila Mohib

Mailing Address
616 E Street N.W. Apt 712

City State Zip Code
Washington DC 20004

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2741445.09

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109534

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
582.87		582.88		1165.75

C. Full Name (Last, First, Middle Initial)
Edna Romero

Mailing Address
7111 Halleck Street

City State Zip Code
District Heights MD 20747

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2742934.62

Activity or Event Identifier:
AVD07

Date MM / DD / YYYY
04 / 30 / 2007

Transaction ID: H4-109535

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
744.76		744.77		1489.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1373.80		1373.83		2747.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Quiyana Washington			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6974 Hanover Parkway Unit 300			Allocated Activity or Event Year-To-Date 2744736.78		
City Greenbelt	State MD	Zip Code 20770	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109536		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
901.08		901.08		1802.16

B. Full Name (Last, First, Middle Initial) Yvonne Williams			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5412 Bradford Ct. #231			Allocated Activity or Event Year-To-Date 2746101.65		
City Alexandria	State VA	Zip Code 22311	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Salaries			Transaction ID: H4-109537		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
682.43		682.44		1364.87

C. Full Name (Last, First, Middle Initial) Paychex			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3060 Williams Drive #300			Allocated Activity or Event Year-To-Date 2815051.10		
City Fairfax	State VA	Zip Code 22031	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Taxes - Payroll			Transaction ID: H4-109539		
Activity or Event Identifier: AVD07					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34474.72		34474.73		68949.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36058.23		36058.25		72116.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Paychex

Mailing Address
3060 Williams Drive #300

City	State	Zip Code
Fairfax	VA	22031

Purpose of Disbursement:
Taxes - Payroll

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2816032.11

Date / /
Transaction ID: H4-109540

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
490.50		490.51		981.01

B. Full Name (Last, First, Middle Initial)
Ellen R Malcolm

Mailing Address
5060 Linnean Avenue, NW

City	State	Zip Code
Washington,	DC	20008

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2819865.10

Date / /
Transaction ID: H4-109541

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1916.49		1916.50		3832.99

C. Full Name (Last, First, Middle Initial)
Colleen Medlock

Mailing Address
14637 Locustwood Lane

City	State	Zip Code
Silver Spring	MD	20905

Purpose of Disbursement:
Salaries

Activity or Event Identifier:
AVD07

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
2820978.74

Date / /
Transaction ID: H4-109542

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
556.82		556.82		1113.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2963.81		2963.83		5927.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Lauren Reznick

Mailing Address
1276 N. Wayne Street Apt 300

City State Zip Code
Arlington VA 22201

Purpose of Disbursement:
Salaries

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2822091.02

Activity or Event Identifier:
AVD07

Date 04 / 30 / 2007

Transaction ID: H4-109543

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
556.14		556.14		1112.28

B. Full Name (Last, First, Middle Initial)
Creative Host Service

Mailing Address
4000 International

City State Zip Code
Madison WI 53704

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108925-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.64		4.64		9.28

C. Full Name (Last, First, Middle Initial)
HMS Host

Mailing Address
11499 Conner St

City State Zip Code
Detroit MI 48213

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108925-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.80		7.79		15.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
556.14		556.14		1112.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Creative Host Service

Mailing Address
4000 International

City State Zip Code
Madison WI 53704

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108925-25000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.25		4.25		8.50

B. Full Name (Last, First, Middle Initial)
Au Bon Pain

Mailing Address
1724 L St, NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108925-40000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.25		6.25		12.50

C. Full Name (Last, First, Middle Initial)
Tail Pipe Restaurant

Mailing Address
1 Detroit Metro Airport

City State Zip Code
Romulus MI 48174

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108925-50000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.65		7.65		15.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
TGI Fridays

Mailing Address
4300 Glumack Drive

City State Zip Code
St. Paul MN 55111

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108925-60000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
5.31 + 5.31 = 10.62

B. Full Name (Last, First, Middle Initial)
Bess Bistro

Mailing Address
500 W 6th St

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108925-70000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
21.94 + 21.95 = 43.89

C. Full Name (Last, First, Middle Initial)
Littlefield Market

Mailing Address
1005 W 34th St

City State Zip Code
Austin TX 78705

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108925-80000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.24 + 3.24 = 6.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City State Zip Code
Minneapolis MN 55450

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108926-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
109.99 + 110.00 = 219.99

B. Full Name (Last, First, Middle Initial)
Jury's Washington Hotel

Mailing Address
1500 New Hampshire Ave

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108926-20000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
15.89 + 15.90 = 31.79

C. Full Name (Last, First, Middle Initial)
Airport Parking

Mailing Address
4000 International Lane

City State Zip Code
Madison WI 53704

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108926-30000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
13.50 + 13.50 = 27.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City State Zip Code
Minneapolis MN 55450

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108926-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
245.30		245.30		490.60

B. Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address
7500 Airline Drive

City State Zip Code
Minneapolis MN 55450

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108926-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.30		132.30		264.60

C. Full Name (Last, First, Middle Initial)
Expedia

Mailing Address
13810 SE Eastgate Way

City State Zip Code
Bellevue WA 98005

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108926-55000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
558.62		558.61		1117.23

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Enterprise Rent a Car

Mailing Address
1201 West 5th

City State Zip Code
Austin TX 78703

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108926-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.66		67.66		135.32

B. Full Name (Last, First, Middle Initial)
Omni Hotel

Mailing Address
700 San Jacinto Blvd

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108926-65000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.13		3.13		6.26

C. Full Name (Last, First, Middle Initial)
Omni Hotel

Mailing Address
700 San Jacinto Blvd

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108926-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.20		39.19		78.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Airport Parking

Mailing Address
4000 International Lane

City State Zip Code
Madison WI 53704

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108926-85000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.00		19.00		38.00

B. Full Name (Last, First, Middle Initial)
Rio Grande

Mailing Address
201 San Jacinto Blvd

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108927-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.65		34.65		69.30

C. Full Name (Last, First, Middle Initial)
Saltlick Barbeque

Mailing Address
3600 Presidential Blvd

City State Zip Code
Austin TX 78719

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108927-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.39		10.39		20.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Idealist.org

Mailing Address
360 West 31st Street Suite 1510

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement:
Meeting/Conference

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-108928-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="25.00"/>		<input type="text" value="25.00"/>		<input type="text" value="50.00"/>

B. Full Name (Last, First, Middle Initial)
Ozio

Mailing Address
1813 M St NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-108929-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="90.24"/>		<input type="text" value="90.24"/>		<input type="text" value="180.48"/>

C. Full Name (Last, First, Middle Initial)
Wegman's

Mailing Address
45131 Columbia Pl

City	State	Zip Code
Sterling	VA	20166

Purpose of Disbursement:
Catering/Facilities

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-108939-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="10.24"/>		<input type="text" value="10.25"/>		<input type="text" value="20.49"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
T Mobile

Mailing Address
P.O. Box 863957

City State Zip Code
Plano TX 75086

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108940-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.99		5.00		9.99

B. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
1734 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108941-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.97		2.97		5.94

C. Full Name (Last, First, Middle Initial)
Gourment Burrito

Mailing Address
1 Airport Drive

City State Zip Code
Oakland CA 94621

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108941-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.53		4.52		9.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
1734 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.68		1.68		3.36

B. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
1734 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.55		6.55		13.10

C. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
1734 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.01		2.01		4.02

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
HMS Dulles Intl Airport

Mailing Address
1 Saarinen Circle

City State Zip Code
Sterling VA 20166

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-60000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.06 + 3.07 = 6.13

B. Full Name (Last, First, Middle Initial)
HMS Dulles Intl Airport

Mailing Address
1 Saarinen Circle

City State Zip Code
Sterling VA 20166

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-70000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
5.50 + 5.50 = 11.00

C. Full Name (Last, First, Middle Initial)
Mikuni Japanese

Mailing Address
1530 J Street

City State Zip Code
Sacramento CA 95814

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-80000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
12.50 + 12.50 = 25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
HMS Oakland Airport

Mailing Address
1 Airport Drive

City State Zip Code
Oakland CA 94162

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-90000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.25		3.25		6.50

B. Full Name (Last, First, Middle Initial)
HMS Sacramento Airport

Mailing Address
6900 Airport Boulevard

City State Zip Code
Sacramento CA 95837

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-100000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.01		3.00		6.01

C. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
3400 E Sky Harbor Blvd

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 05 / 2007

Transaction ID: H4-108941-110000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.97		1.98		3.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
HMS Phoenix Airport

Mailing Address
3400 E Sky Harbor Blvd

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108941-120000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.91		6.91		13.82

B. Full Name (Last, First, Middle Initial)
Matt's Big Breakfast

Mailing Address
3400 E Sky Harbor Blvd

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108941-140000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.31		13.31		26.62

C. Full Name (Last, First, Middle Initial)
The UPS Store

Mailing Address
7000 16th St

City State Zip Code
Phoenix AZ 85020

Purpose of Disbursement:
Postage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108942-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.16		2.17		4.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Cingular

Mailing Address
PO BOX 650574

City State Zip Code
Dallas TX 75265

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
 .00

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-108943-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="89.66"/>		<input type="text" value="89.66"/>		<input type="text" value="179.32"/>

B. Full Name (Last, First, Middle Initial)
Rincon Center

Mailing Address
101 Spear St

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
 .00

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-108944-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="14.75"/>		<input type="text" value="14.75"/>		<input type="text" value="29.50"/>

C. Full Name (Last, First, Middle Initial)
Chevron

Mailing Address
755 S Tracy Blvd

City State Zip Code
Tracy CA 95376

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
 .00

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-108944-20000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="17.50"/>		<input type="text" value="17.51"/>		<input type="text" value="35.01"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hilton

Mailing Address
11111 North 7th Street

City Phoenix	State AZ	Zip Code 85020	Category/ Type
Purpose of Disbursement: Travel/Accommodation /Meals			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-108944-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="51.02"/>		<input type="text" value="51.02"/>		<input type="text" value="102.04"/>

B. Full Name (Last, First, Middle Initial)
Rincon Center

Mailing Address
101 Spear St

City San Francisco	State CA	Zip Code 94105	Category/ Type
Purpose of Disbursement: Travel/Accommodation /Meals			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-108944-35000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="14.75"/>		<input type="text" value="14.75"/>		<input type="text" value="29.50"/>

C. Full Name (Last, First, Middle Initial)
Main and Mission Parking

Mailing Address
833 Mission Street

City San Francisco	State CA	Zip Code 94103	Category/ Type
Purpose of Disbursement: Travel/Accommodation /Meals			

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-108944-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="12.50"/>		<input type="text" value="12.50"/>		<input type="text" value="25.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
P.O. Box 36649

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	0	7

Transaction ID: H4-108944-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.00		34.00		68.00

B. Full Name (Last, First, Middle Initial)
Jury's Washington Hotel

Mailing Address
1500 New Hampshire Avenue, N.W

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	0	7

Transaction ID: H4-108944-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.85		104.85		209.70

C. Full Name (Last, First, Middle Initial)
Five Star Parking

Mailing Address
One Airport Drive, Box 15

City	State	Zip Code
Oakland	CA	94621

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	0	7

Transaction ID: H4-108944-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.00		33.00		66.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Washington Flyer Taxi

Mailing Address
1008 North Randolph Street

City State Zip Code
Arlington VA 22201

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-108944-90000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.50		28.50		57.00

B. Full Name (Last, First, Middle Initial)
Main and Mission Parking

Mailing Address
833 Mission Street

City State Zip Code
San Francisco CA 94103

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-108944-95000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

C. Full Name (Last, First, Middle Initial)
Rincon Center

Mailing Address
101 Spear St

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 05 / 2007

Transaction ID: H4-108944-105000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.75		14.75		29.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Main and Mission Parking

Mailing Address
833 Mission Street

City State Zip Code
San Francisco CA 94103

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date / /

Transaction ID: H4-108944-112500

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="12.50"/>		<input type="text" value="12.50"/>		<input type="text" value="25.00"/>

B. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
P.O. Box 36649

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date / /

Transaction ID: H4-108944-130000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="24.00"/>		<input type="text" value="24.00"/>		<input type="text" value="48.00"/>

C. Full Name (Last, First, Middle Initial)
Sacramento Airport

Mailing Address
6900 Airport Boulevard

City State Zip Code
Sacramento CA 95837

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date / /

Transaction ID: H4-108944-140000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="30.00"/>		<input type="text" value="30.00"/>		<input type="text" value="60.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Circle K

Mailing Address
602 N 1st Ave

City State Zip Code
Phoenix AZ 85003

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108944-150000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.81		4.81		9.62

B. Full Name (Last, First, Middle Initial)
Dollar Rent a Car

Mailing Address
1722 E Rental Car Way

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108944-160000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.01		88.00		176.01

C. Full Name (Last, First, Middle Initial)
Bell South

Mailing Address
PO Box 70807

City State Zip Code
Charlotte NC 28272-0807

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108974-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.79		110.79		221.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Time Warner

Mailing Address
One Time Warner Center

City State Zip Code
New York NY 10019

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108977-5000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.67		25.67		51.34

B. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address
Payment Center

City State Zip Code
Sacramento CA 95887-0001

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108977-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.22		37.22		74.44

C. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
PO Box 17464

City State Zip Code
Baltimore MD 21297-1464

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 05 / 2007

Transaction ID: H4-108977-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.00		20.00		40.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hotels.com

Mailing Address
8140 Walnut Hill Lane

City	State	Zip Code
Dallas	TX	75231

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109049-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.28		125.28		250.56

B. Full Name (Last, First, Middle Initial)
Beacon Hotel

Mailing Address
1615 RHODE ISLAND AVENUE, NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109049-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.94		58.94		117.88

C. Full Name (Last, First, Middle Initial)
Henley Park Hotel

Mailing Address
926 Massachusetts Ave NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109049-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.00		14.00		28.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Henley Park Hotel			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 926 Massachusetts Ave NW			Allocated Activity or Event Year-To-Date _____ .00		
City Washington	State DC	Zip Code 20001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type			
Activity or Event Identifier: [MEMO ITEM]			Transaction ID: H4-109049-40000		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
130.07		130.08		260.15

B. Full Name (Last, First, Middle Initial) Henley Park Hotel			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 926 Massachusetts Ave NW			Allocated Activity or Event Year-To-Date _____ .00		
City Washington	State DC	Zip Code 20001	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type			
Activity or Event Identifier: [MEMO ITEM]			Transaction ID: H4-109049-50000		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.38		1.38		2.76

C. Full Name (Last, First, Middle Initial) Expedia			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13810 SE Eastgate Way			Allocated Activity or Event Year-To-Date _____ .00		
City Bellevue	State WA	Zip Code 98005	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type			
Activity or Event Identifier: [MEMO ITEM]			Transaction ID: H4-109049-60000		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.00		15.00		30.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Sirrus Consulting, Inc.

Mailing Address
7550 Southwest 4th Street

City State Zip Code
Plantation FL 33317

Purpose of Disbursement:
Consulting Fundraising

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109049-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.53		92.53		185.06

B. Full Name (Last, First, Middle Initial)
HMS PHOENIX AIRPORT

Mailing Address
3200 E Sky Harbor Blvd

City State Zip Code
PHOENIX AZ 85034

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109049-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.81		5.80		11.61

C. Full Name (Last, First, Middle Initial)
SCALA'S CAFE

Mailing Address
432 Powell St

City State Zip Code
SAN FRANCISCO CA 94102

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109049-90000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.62		3.62		7.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Luna Grill

Mailing Address
1301 Connecticut Ave NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109053-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.23		13.23		26.46

B. Full Name (Last, First, Middle Initial)
Daily Grill

Mailing Address
1200 18th St NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109053-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.89		35.90		71.79

C. Full Name (Last, First, Middle Initial)
Da Marco

Mailing Address
1520 Westheimer Rd

City State Zip Code
Houston TX 77006

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109055-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
108.39		108.39		216.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Louie's

Mailing Address
106 E. 6th St

City	State	Zip Code
Austin	TX	78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109055-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.29		31.29		62.58

B. Full Name (Last, First, Middle Initial)
Cafe Rabelais

Mailing Address
2422 Times Blvd

City	State	Zip Code
Houston	TX	77005

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109055-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.03		22.03		44.06

C. Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address
401 Franklin St

City	State	Zip Code
Houston	TX	77201

Purpose of Disbursement:
Postage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109056-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.00		78.00		156.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Doubletree Hotel

Mailing Address

1515 Rhode Island Ave, NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109057-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.81		12.81		25.62

B. Full Name (Last, First, Middle Initial)
Omni Hotel

Mailing Address

700 San Jacinto

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109057-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
159.42		159.43		318.85

C. Full Name (Last, First, Middle Initial)
Omni Hotel

Mailing Address

700 San Jacinto

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109057-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.16		18.15		36.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Da'Umberto Restaurant

Mailing Address
107 W 17th St

City State Zip Code
New York NY 10011

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109061-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.33		56.32		112.65

B. Full Name (Last, First, Middle Initial)
Steak Frites

Mailing Address
9 E 16th St

City State Zip Code
New York NY 10003

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109061-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.11		13.11		26.22

C. Full Name (Last, First, Middle Initial)
Madison Bistro

Mailing Address
238 Madison Ave

City State Zip Code
New York NY 10016

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109061-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.38		24.39		48.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Bella Blu

Mailing Address
967 Lexington Ave

City	State	Zip Code
New York	NY	10021

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109061-40000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="42.50"/>		<input type="text" value="42.50"/>		<input type="text" value="85.00"/>

B. Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address
60 Mass Ave NW

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109062-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="165.00"/>		<input type="text" value="165.00"/>		<input type="text" value="330.00"/>

C. Full Name (Last, First, Middle Initial)
Smoke Chophouse Rest

Mailing Address
36 Engle St

City	State	Zip Code
Englewood	NJ	07631

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109063-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="30.00"/>		<input type="text" value="30.00"/>		<input type="text" value="60.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
High Noon

Mailing Address
1200 19th St NW,

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109063-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.08		30.07		60.15

B. Full Name (Last, First, Middle Initial)
Au Bon Pain

Mailing Address
1732 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109063-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.10		15.11		30.21

C. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
17 E Palisade Ave

City State Zip Code
Engelwood NJ 07631

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109063-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.81		2.81		5.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Soho George

Mailing Address
335 George St # A101

City	State	Zip Code
New Brunswick	NJ	08901

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109063-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="16.32"/>		<input type="text" value="16.32"/>		<input type="text" value="32.64"/>

B. Full Name (Last, First, Middle Initial)
Port City Java

Mailing Address
296 George Street

City	State	Zip Code
New Brunswick	NJ	08901

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109063-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="5.43"/>		<input type="text" value="5.43"/>		<input type="text" value="10.86"/>

C. Full Name (Last, First, Middle Initial)
Hilton

Mailing Address
3 Tower Center Boulevard

City	State	Zip Code
East Brunswick	NJ	08816

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109063-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="35.00"/>		<input type="text" value="35.00"/>		<input type="text" value="70.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Main Street Eatery

Mailing Address
907 Main St

City	State	Zip Code
Lynchburg	VA	24504

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	7

Transaction ID: H4-109063-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.50		22.50		45.00

B. Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address
9715 Belair Rd

City	State	Zip Code
White Marsh	MD	21236

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	7

Transaction ID: H4-109064-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.24		14.24		28.48

C. Full Name (Last, First, Middle Initial)
Crowne Plaza Hotel

Mailing Address
401 S Van Brunt St

City	State	Zip Code
Englewood	NJ	07631

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	7

Transaction ID: H4-109064-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.95		36.95		73.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address
2400 Petrolia Ave

City State Zip Code
Baltimore MD 21226

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109064-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.87		7.87		15.74

B. Full Name (Last, First, Middle Initial)
Sunoco

Mailing Address
1.7 S NJ Turnpike

City State Zip Code
Cranbury NJ 08512

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109064-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.89		15.89		31.78

C. Full Name (Last, First, Middle Initial)
Cheap Tickets.com

Mailing Address
500 West Madison Street Suite 1000

City State Zip Code
Chicago IL 60661

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109064-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.68		58.68		117.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hilton

Mailing Address
3 Tower Center Boulevard

City State Zip Code
East Brunswick NJ 08816

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109064-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.35		5.34		10.69

B. Full Name (Last, First, Middle Initial)
Exxon

Mailing Address
7 N Philadelphia Blvd

City State Zip Code
Aberdeen MD 21001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109064-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.33		13.32		26.65

C. Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address
1133 S Philadelphia Blvd

City State Zip Code
Aberdeen MD 21001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109064-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.48		17.48		34.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hilton
Mailing Address
3 Tower Center Boulevard
City State Zip Code
East Brunswick NJ 08816
Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

[MEMO ITEM] **Transaction ID:** H4-109064-90000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.18		21.18		42.36

B. Full Name (Last, First, Middle Initial)
Cheap Tickets.com
Mailing Address
500 West Madison Stre Suite 1000
City State Zip Code
Chicago IL 60661
Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

[MEMO ITEM] **Transaction ID:** H4-109064-100000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.51		61.51		123.02

C. Full Name (Last, First, Middle Initial)
Holtsman Express
Mailing Address
160 East King Street
City State Zip Code
Strasburg VA 22657
Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

[MEMO ITEM] **Transaction ID:** H4-109064-110000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.50		11.50		23.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Exxon

Mailing Address
1025 S Main St

City State Zip Code
Culpepper VA 78228

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109064-120000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.93		3.92		7.85

B. Full Name (Last, First, Middle Initial)
Exxon

Mailing Address
660 N Glebe Rd

City State Zip Code
Arlington VA 22203

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109064-130000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.62		10.62		21.24

C. Full Name (Last, First, Middle Initial)
Langley Square

Mailing Address
6335 GEORGETOWN PIKE

City State Zip Code
McLean VA 22102

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109064-140000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.79		9.79		19.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Exxon

Mailing Address
660 N Glebe Rd

City State Zip Code
Arlington VA 22203

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109064-150000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.85		0.88		1.73

B. Full Name (Last, First, Middle Initial)
1-800-Flowers

Mailing Address
1600 Stewart Avenue

City State Zip Code
Westbury NY 11590

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109067-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.49		31.49		62.98

C. Full Name (Last, First, Middle Initial)
Papyrus

Mailing Address
1300 Wisconsin Ave NW,

City State Zip Code
Washington DC 20007

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109068-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.18		23.19		46.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.65		119.65		239.30

B. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-15000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.65		119.65		239.30

C. Full Name (Last, First, Middle Initial)
Citgo

Mailing Address
194 Auburn St

City State Zip Code
Portland ME 04103

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-25000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.98		1.98		3.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address
60 Mass Ave NW

City State Zip Code
Washington DC 20002

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-35000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.00		38.00		76.00

B. Full Name (Last, First, Middle Initial)
Hudson News

Mailing Address
1 Airport Drive

City State Zip Code
Manchester NH 03103

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-45000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.67		2.67		5.34

C. Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address
60 Mass Ave NW

City State Zip Code
Washington DC 20002

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-55000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.00		6.00		12.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Embassy Suites

Mailing Address
1250 22nd Street NW

City State Zip Code
Washington DC 20037

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-65000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.70		28.70		57.40

B. Full Name (Last, First, Middle Initial)
HMS BWI Airport

Mailing Address
BWI Airport

City State Zip Code
Hanover MD 21076

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-75000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.71		1.71		3.42

C. Full Name (Last, First, Middle Initial)
McDonalds

Mailing Address
50 Calef Hwy

City State Zip Code
Epping NH 03857

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109069-85000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.77		5.77		11.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Manchester Airport

Mailing Address
1 Airport Drive

City State Zip Code
Manchester NH 03103

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109069-95000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.50		14.50		29.00

B. Full Name (Last, First, Middle Initial)
Embassy Suites

Mailing Address
1250 22nd Street NW

City State Zip Code
Washington DC 20037

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109069-115000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
239.90		239.91		479.81

C. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109069-125000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.50		43.50		87.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Fronterea Grill

Mailing Address
449 N CLARK ST

City State Zip Code
CHICAGO IL 60610

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109071-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.50		36.50		73.00

B. Full Name (Last, First, Middle Initial)
FOUR SEASONS HOTEL

Mailing Address
120 E Delaware PI

City State Zip Code
CHICAGO IL 60611

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109071-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.50		15.50		31.00

C. Full Name (Last, First, Middle Initial)
LE COLONIAL

Mailing Address
937 N Rush St

City State Zip Code
CHICAGO IL 60611

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109071-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.00		64.00		128.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
THE WHITEHALL HOTEL

Mailing Address
105 E Delaware Pl

City	State	Zip Code
CHICAGO	IL	60611

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109071-40000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="116.74"/>		<input type="text" value="116.75"/>		<input type="text" value="233.49"/>

B. Full Name (Last, First, Middle Initial)
SPIAGGIA

Mailing Address
980 N Michigan Ave # 2

City	State	Zip Code
CHICAGO	IL	60611

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109071-50000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="53.00"/>		<input type="text" value="53.00"/>		<input type="text" value="106.00"/>

C. Full Name (Last, First, Middle Initial)
AOL

Mailing Address
8619 Westwood Center

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109072-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="16.42"/>		<input type="text" value="16.43"/>		<input type="text" value="32.85"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
The Great Dane Pub

Mailing Address
123 E. Doty Street

City State Zip Code
Madison WI 53703

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109074-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.00		13.00		26.00

B. Full Name (Last, First, Middle Initial)
Holiday Inn

Mailing Address
11111 W North Ave

City State Zip Code
Wauwatosa WI 53226

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109075-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.22		70.22		140.44

C. Full Name (Last, First, Middle Initial)
Marges Amoco

Mailing Address
735 E Washington Ave

City State Zip Code
Madison WI 53703

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109075-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.24		2.24		4.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Marges Amoco

Mailing Address
735 E Washington Ave

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109075-30000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="15.34"/>		<input type="text" value="15.34"/>		<input type="text" value="30.68"/>

B. Full Name (Last, First, Middle Initial)
Capitol BP

Mailing Address
7311 W Capitol Dr

City	State	Zip Code
Milwaukee	WI	53216

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109075-40000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="16.63"/>		<input type="text" value="16.64"/>		<input type="text" value="33.27"/>

C. Full Name (Last, First, Middle Initial)
Washington Mobil

Mailing Address
3505 E Washington Avenue

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109075-50000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="16.22"/>		<input type="text" value="16.21"/>		<input type="text" value="32.43"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Exxon

Mailing Address
7205 County Highway I

City State Zip Code
Madison WI 53703

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109075-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.68		15.68		31.36

B. Full Name (Last, First, Middle Initial)
BARMY WINES

Mailing Address
1912 L St NW

City State Zip Code
WASHINGTON DC 20036

Purpose of Disbursement:
Meeting/Conference

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109076-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.10		44.10		88.20

C. Full Name (Last, First, Middle Initial)
HIGH NOON

Mailing Address
1200 19th St NW

City State Zip Code
WASHINGTON DC 20036

Purpose of Disbursement:
Meeting/Conference

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109076-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.79		54.79		109.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Staples

Mailing Address
19th & L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:
Meeting/Conference

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-109076-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="48.08"/>		<input type="text" value="48.09"/>		<input type="text" value="96.17"/>

B. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address
1400 L Street NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement:
Postage

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-109077-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="195.00"/>		<input type="text" value="195.00"/>		<input type="text" value="390.00"/>

C. Full Name (Last, First, Middle Initial)
The UPS Store

Mailing Address
244 Shopping Ave

City	State	Zip Code
Sarasota	FL	34237

Purpose of Disbursement:
Deliveries

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-109081-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="28.89"/>		<input type="text" value="28.89"/>		<input type="text" value="57.78"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
ADC Map and Travel

Mailing Address
1636 I St NW

City State Zip Code
Washington DC 20006

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109084-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.83		15.84		31.67

B. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address
1400 L Street NW

City State Zip Code
Washington DC 20005

Purpose of Disbursement:
Postage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109084-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.50		42.50		85.00

C. Full Name (Last, First, Middle Initial)
AOL

Mailing Address
8619 Westwood Center

City State Zip Code
Vienna VA 22182

Purpose of Disbursement:
Internet Services

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109092-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.47		7.48		14.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
US Airways

Mailing Address
4000 E. Sky Harbor Blvd

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109093-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
124.40 124.40 248.80

B. Full Name (Last, First, Middle Initial)
Jury's Washington Hotel

Mailing Address
1500 New Hampshire Ave

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109093-20000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
129.28 129.28 258.56

C. Full Name (Last, First, Middle Initial)
New England Parking

Mailing Address
T F Green Airport

City State Zip Code
Providence RI 02903

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109093-30000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
22.50 22.50 45.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 0.00 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109093-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.40		98.40		196.80

B. Full Name (Last, First, Middle Initial)
US Airways

Mailing Address
4000 E. Sky Harbor Blvd

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109093-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.40		104.40		208.80

C. Full Name (Last, First, Middle Initial)
Enterprise Rent-A-Car

Mailing Address
20400 SW Teton

City State Zip Code
Tualatin OR 97062

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date MM / DD / YYYY
04 / 11 / 2007

Transaction ID: H4-109093-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.38		79.39		158.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Crowne Plaza Hotel

Mailing Address
30 Lodge St

City State Zip Code
Albany NY 12207

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109093-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.35		51.35		102.70

B. Full Name (Last, First, Middle Initial)
Sunoco

Mailing Address
2862 Hartford Ave

City State Zip Code
Johnston RI 02919

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109093-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.70		16.69		33.39

C. Full Name (Last, First, Middle Initial)
Dunkin Donuts

Mailing Address
1678 Post Rd

City State Zip Code
Warwick RI 02888

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109094-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.95		0.95		1.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Sizzling Express

Mailing Address
1150 Connecticut Ave NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109094-20000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.77		4.77		9.54

B. Full Name (Last, First, Middle Initial)
Au Bon Pain

Mailing Address
1732 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109094-30000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.04		5.04		10.08

C. Full Name (Last, First, Middle Initial)
National Airport

Mailing Address
Aviation Circle

City State Zip Code
Washington DC 20001

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109094-40000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.48		6.48		12.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Jack's Oyster House			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 42 State St			Allocated Activity or Event Year-To-Date .00		
City Albany	State NY	Zip Code 12207	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109094-50000		
Activity or Event Identifier: [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.11		53.11		106.22

B. Full Name (Last, First, Middle Initial) Papa Gino's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Mass Tpke E			Allocated Activity or Event Year-To-Date .00		
City Lee	State MA	Zip Code 01238	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109094-60000		
Activity or Event Identifier: [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.56		3.56		7.12

C. Full Name (Last, First, Middle Initial) Wesco Propane			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 307 Farnum Pike			Allocated Activity or Event Year-To-Date .00		
City Smithfield	State RI	Zip Code 02917	Date <input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Travel/Accommodation /Meals			Transaction ID: H4-109095-10000		
Activity or Event Identifier: [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.63		64.64		129.27

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
The UPS Store

Mailing Address
601 Van Ness Ave

City	State	Zip Code
San Francisco	CA	94102

Purpose of Disbursement:
Deliveries

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-109096-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="29.07"/>		<input type="text" value="29.07"/>		<input type="text" value="58.14"/>

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

Mailing Address
140 NE 8th St

City	State	Zip Code
Miami	FL	33132

Purpose of Disbursement:
Deliveries

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-109100-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4.17"/>		<input type="text" value="4.18"/>		<input type="text" value="8.35"/>

C. Full Name (Last, First, Middle Initial)
Real.com

Mailing Address
PO Box 91123

City	State	Zip Code
Seattle	WA	98111

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /

Transaction ID: H4-109101-10000

Activity or Event Identifier:
[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.89"/>		<input type="text" value="7.89"/>		<input type="text" value="15.78"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Sun Pass

Mailing Address
P. O. Box 880089

City State Zip Code
Boca Raton FL 33488

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109102-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

B. Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address
4600 Bayline Dr

City State Zip Code
Fort Myers FL 33917

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109102-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.82		19.83		39.65

C. Full Name (Last, First, Middle Initial)
Kennedy BP

Mailing Address
848 Mcclosky Blvd

City State Zip Code
Tampa FL 33605

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109102-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.11		12.11		24.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Sun Pass

Mailing Address
P. O. Box 880089

City State Zip Code
Boca Raton FL 33488

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109102-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

B. Full Name (Last, First, Middle Initial)
Sun Pass

Mailing Address
P. O. Box 880089

City State Zip Code
Boca Raton FL 33488

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109102-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.00		10.00		20.00

C. Full Name (Last, First, Middle Initial)
Trattoria Luna

Mailing Address
9477 S Dixie Hwy

City State Zip Code
Miami FL 33156

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109103-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.42		19.42		38.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address
140 NE 8th St

City State Zip Code
Miami FL 33132

Purpose of Disbursement:
Postage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109103-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.52		6.53		13.05

B. Full Name (Last, First, Middle Initial)
Deli Lane Cafe

Mailing Address
7230 SW 59th Ave

City State Zip Code
Miami FL 33143

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109103-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.57		4.57		9.14

C. Full Name (Last, First, Middle Initial)
Encore

Mailing Address
2500 Vanderbilt Beach Road

City State Zip Code
Naples FL 34109

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109103-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.81		8.81		17.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
The Fresh Market

Mailing Address
27251 Bay Landing Dr

City	State	Zip Code
Bonita Springs	FL	34135

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109103-50000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="23.51"/>		<input type="text" value="23.51"/>		<input type="text" value="47.02"/>

B. Full Name (Last, First, Middle Initial)
Jaguar Ceviche Spoon

Mailing Address
3067 Grand Ave

City	State	Zip Code
Miami	FL	33132

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109103-60000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="15.77"/>		<input type="text" value="15.77"/>		<input type="text" value="31.54"/>

C. Full Name (Last, First, Middle Initial)
Sarasota News

Mailing Address
1341 Main St

City	State	Zip Code
Sarasota	FL	34236

Purpose of Disbursement:
Office Supplies Expenses

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109104-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="10.57"/>		<input type="text" value="10.57"/>		<input type="text" value="21.14"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Cingular Wireless

Mailing Address
PO Box 17356

City State Zip Code
Baltimore MD 21297-1356

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109105-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.77		73.78		147.55

B. Full Name (Last, First, Middle Initial)
Wyndham Westshore

Mailing Address
4860 W Kennedy Blvd

City State Zip Code
Tampa FL 33609

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109106-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.00		6.00		12.00

C. Full Name (Last, First, Middle Initial)
Avis

Mailing Address
8330 S Dixie Hwy

City State Zip Code
Miami FL 33143

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109106-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.24		93.24		186.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
HMS Tampa Airport

Mailing Address
5503 West Spruce Street

City State Zip Code
Tampa FL 33607

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109106-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.16		2.16		4.32

B. Full Name (Last, First, Middle Initial)
Au Bon Pain

Mailing Address
1732 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109106-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.54		4.54		9.08

C. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
1734 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109106-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.32		2.32		4.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Au Bon Pain

Mailing Address
1732 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109106-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.06		9.05		18.11

B. Full Name (Last, First, Middle Initial)
HMS Miami Airport

Mailing Address
P.O. Box 025504

City State Zip Code
Miami FL 33102

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109106-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.92		1.92		3.84

C. Full Name (Last, First, Middle Initial)
Avis

Mailing Address
305 Palmetto Ave

City State Zip Code
Orlando FL 32801

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109106-90000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.03		31.03		62.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Miami International Airport
Mailing Address
P.O. Box 025504
City Miami **State** FL **Zip Code** 33102
Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:
[MEMO ITEM]

Date 04 / 11 / 2007
Transaction ID: H4-109106-100000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.39		1.39		2.78

B. Full Name (Last, First, Middle Initial)
Sunoco
Mailing Address
902 S Orange Ave
City Orlando **State** FL **Zip Code** 32806
Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:
[MEMO ITEM]

Date 04 / 11 / 2007
Transaction ID: H4-109106-110000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.30		11.31		22.61

C. Full Name (Last, First, Middle Initial)
Miami International Airport
Mailing Address
P.O. Box 025504
City Miami **State** FL **Zip Code** 33102
Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
.00

Activity or Event Identifier:
[MEMO ITEM]

Date 04 / 11 / 2007
Transaction ID: H4-109106-120000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.00		15.00		30.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
PO Box 17464

City State Zip Code
Baltimore MD 21297-1464

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109110-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.61		30.61		61.22

B. Full Name (Last, First, Middle Initial)
Continental Airlines

Mailing Address
1600 Smith Street

City State Zip Code
Houston TX 77002

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109116-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.05		177.05		354.10

C. Full Name (Last, First, Middle Initial)
Continental Airlines

Mailing Address
1600 Smith Street

City State Zip Code
Houston TX 77002

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109116-10625

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.05		177.05		354.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Hotels.com

Mailing Address
8140 Walnut Hill Lane

City State Zip Code
Dallas TX 75231

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109116-30000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
299.25		299.25		598.50

B. Full Name (Last, First, Middle Initial)
Iron Cactus

Mailing Address
606 Trinity St

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109116-40000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.91		35.92		71.83

C. Full Name (Last, First, Middle Initial)
Garden State Diner

Mailing Address
Newark International Airport Terminal C

City State Zip Code
Newark NJ 07197

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109116-50000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.74		9.74		19.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Barwood Taxi

Mailing Address
4900 Nicholson Ct

City	State	Zip Code
Kensington	MD	20895

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109116-60000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="23.00"/>		<input type="text" value="23.00"/>		<input type="text" value="46.00"/>

B. Full Name (Last, First, Middle Initial)
Exxon

Mailing Address
1320 E Oltorf St

City	State	Zip Code
Austin	TX	78704

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109116-70000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="10.31"/>		<input type="text" value="10.31"/>		<input type="text" value="20.62"/>

C. Full Name (Last, First, Middle Initial)
Enterprise Rent a Car

Mailing Address
1201 West 5th

City	State	Zip Code
Austin	TX	78703

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109116-80000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="33.54"/>		<input type="text" value="33.53"/>		<input type="text" value="67.07"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
501 W 15th St

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109116-90000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.00		15.00		30.00

B. Full Name (Last, First, Middle Initial)
Union Square Garage

Mailing Address
333 Post St

City State Zip Code
San Francisco CA 94108

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109117-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.00		4.00		8.00

C. Full Name (Last, First, Middle Initial)
Chaya Brasserie

Mailing Address
132 The Embarcadero

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109118-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.13		51.13		102.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Sushi Ran

Mailing Address
107 Caledonia St

City State Zip Code
Sausalito CA 94965

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109118-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.43		15.43		30.86

B. Full Name (Last, First, Middle Initial)
Peet's Coffee

Mailing Address
3419 California St

City State Zip Code
SAN FRANCISCO CA 94118

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109119-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.06		2.05		4.11

C. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
1734 L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109119-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.61		3.61		7.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Starbucks

Mailing Address
1734 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109119-30000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2.24"/>		<input type="text" value="2.23"/>		<input type="text" value="4.47"/>

B. Full Name (Last, First, Middle Initial)
Embassy Suites

Mailing Address
1250 22nd Street Northwest,

City	State	Zip Code
Washington	DC	20037

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109119-40000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="18.95"/>		<input type="text" value="18.95"/>		<input type="text" value="37.90"/>

C. Full Name (Last, First, Middle Initial)
Firkin and Fox

Mailing Address
1 Saarinen Cir

City	State	Zip Code
STERLING	VA	20166

Purpose of Disbursement:
Travel/Accommodation /Meals

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109119-50000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="16.12"/>		<input type="text" value="16.13"/>		<input type="text" value="32.25"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
C&C Limousines

Mailing Address
2368 Walsh Ave

City State Zip Code
Santa Clara CA 95050

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109119-60000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.05		44.05		88.10

B. Full Name (Last, First, Middle Initial)
Washington Flyer

Mailing Address
DULLES INTERNATIONAL AIRPORT

City State Zip Code
WASHINGTON DC 20166

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109119-70000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.60		31.60		63.20

C. Full Name (Last, First, Middle Initial)
DOUBLETREE HOTEL

Mailing Address
1515 RHODE ISLAND AVE

City State Zip Code
WASHINGTON DC 20036

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109119-80000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.52		53.53		107.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Comcast

Mailing Address
40 West Leeds Ave

City	State	Zip Code
Pleasantville	NJ	08232

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109169-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="23.95"/>		<input type="text" value="23.95"/>		<input type="text" value="47.90"/>

B. Full Name (Last, First, Middle Initial)
Staples

Mailing Address
1280 Lexington Ave

City	State	Zip Code
New York	NY	10028

Purpose of Disbursement:
Office Supplies Expenses

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109202-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="102.45"/>		<input type="text" value="102.45"/>		<input type="text" value="204.90"/>

C. Full Name (Last, First, Middle Initial)
Comcast

Mailing Address
West Leeds Ave

City	State	Zip Code
Pleasantville	NJ	08232

Purpose of Disbursement:
Internet Services

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109209-5000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="19.00"/>		<input type="text" value="19.00"/>		<input type="text" value="38.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Papa John's Pizza

Mailing Address
2525 Pennsylvania Ave NW

City State Zip Code
Washington DC 20037

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109337-10000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.84		80.84		161.68

B. Full Name (Last, First, Middle Initial)
Schlotzky's Deli

Mailing Address
106 E 6th St

City State Zip Code
Austin TX 78701

Purpose of Disbursement:
Travel/Accommodation /Meals

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109338-10000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
236.26		236.27		472.53

C. Full Name (Last, First, Middle Initial)
Lexis Nexis

Mailing Address
P. O. Box 7247-7090

City State Zip Code
Philadelphia PA 19170

Purpose of Disbursement:
Computer Services

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Date 04 / 11 / 2007

Transaction ID: H4-109339-10000

Activity or Event Identifier:

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
666.22		666.23		1332.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Idealist.org

Mailing Address
360 West 31st Street Suite 1510

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement:
Employee Recruitment

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109340-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="720.00"/>		<input type="text" value="720.00"/>		<input type="text" value="1440.00"/>

B. Full Name (Last, First, Middle Initial)
AOL

Mailing Address
8619 Westwood Center

City	State	Zip Code
Vienna	VA	22182

Purpose of Disbursement:
Internet Services

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109341-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="9.95"/>		<input type="text" value="9.95"/>		<input type="text" value="19.90"/>

C. Full Name (Last, First, Middle Initial)
Headsets.com

Mailing Address
One Daniel Burnham Ct. 400C

City	State	Zip Code
SAN FRANCISCO	CA	94109

Purpose of Disbursement:
Office Supplies Expenses

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109342-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="143.95"/>		<input type="text" value="143.95"/>		<input type="text" value="287.90"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Best Buy

Mailing Address
1717 Harrison St

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109342-20000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
49.50 49.50 99.00

B. Full Name (Last, First, Middle Initial)
Borders

Mailing Address
18th & L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109342-30000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
9.49 9.49 18.98

C. Full Name (Last, First, Middle Initial)
Borders

Mailing Address
18th & L Street NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement:
Office Supplies Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 11 / 2007

Transaction ID: H4-109343-10000

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
9.49 9.49 18.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 0.00 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address
1400 L Street NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement:
Postage

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109344-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="19.50"/>		<input type="text" value="19.50"/>		<input type="text" value="39.00"/>

B. Full Name (Last, First, Middle Initial)
WMATA

Mailing Address
600 5th St., NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement:
Local Transportation

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109345-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="265.00"/>		<input type="text" value="265.00"/>		<input type="text" value="530.00"/>

C. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address
PO Box 1

City	State	Zip Code
Worcester	MA	01654

Purpose of Disbursement:
Telephone

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Activity or Event Identifier:
[MEMO ITEM]

Date / /
Transaction ID: H4-109346-10000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2738.10"/>		<input type="text" value="2738.11"/>		<input type="text" value="5476.21"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address
2702 Love Field Drive

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109347-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2357.72"/>		<input type="text" value="2357.73"/>		<input type="text" value="4715.45"/>

B. Full Name (Last, First, Middle Initial)
Omni Shoreham Hotel

Mailing Address
2500 Calvert Street NW

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement:
Travel/Accommodation /Meals

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109348-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2385.07"/>		<input type="text" value="2385.07"/>		<input type="text" value="4770.14"/>

C. Full Name (Last, First, Middle Initial)
Judy Loeb Goldfein

Mailing Address
50 East 89th Street 6E

City	State	Zip Code
New York	NY	10128

Purpose of Disbursement:
Rent

Activity or Event Identifier:

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date / /
Transaction ID: H4-109407-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="600.00"/>		<input type="text" value="600.00"/>		<input type="text" value="1200.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Rochelle Sachs Levin

Mailing Address
22800 SW 157th Avenue

City State Zip Code
Miami FL 33170

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 26 / 2007

Transaction ID: H4-109423-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

B. Full Name (Last, First, Middle Initial)
MCI

Mailing Address
PO Box 17890

City State Zip Code
Denver CO 80217

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 26 / 2007

Transaction ID: H4-109425-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.00		25.00		50.00

C. Full Name (Last, First, Middle Initial)
Gerald Merfish

Mailing Address
P.O. Box 15879

City State Zip Code
Houston TX 77220-5879

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date 04 / 26 / 2007

Transaction ID: H4-109427-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00		500.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address
PO Box 17464

City	State	Zip Code
Baltimore	MD	21297-1464

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	0	7

Transaction ID: H4-109456-10000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.32		47.32		94.64

B. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address
Payment Center

City	State	Zip Code
Sacramento	CA	95887-0001

Purpose of Disbursement:
Telephone

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

.00

Activity or Event Identifier:

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	0	7

Transaction ID: H4-109456-20000

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.00		10.00		20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
365925.11	360458.80	726383.91

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109330	
Mailing Address P.O. Box 0001		Date of Disbursement MM / DD / YYYY 04 / 01 / 2007	
City Chicago	State IL	Zip Code 60679	Amount of Each Disbursement this Period 4.50
Purpose of Disbursement Credit Card Service Charges		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: SB21B-109329	
Mailing Address 1501 Pennsylvania Ave. NW		Date of Disbursement MM / DD / YYYY 04 / 01 / 2007	
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 8028.81
Purpose of Disbursement Credit Card Service Charges		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109336	
Mailing Address P.O. Box 0001		Date of Disbursement MM / DD / YYYY 04 / 02 / 2007	
City Chicago	State IL	Zip Code 60679	Amount of Each Disbursement this Period 45.15
Purpose of Disbursement Credit Card Service Charges		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	8078.46
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. GSI - Gordon & Schwenkmeyer		Transaction ID: SB21B-109634 Date of Disbursement 04 / 05 / 2007
Mailing Address 300 N Sepulveda Blvd #2050		Amount of Each Disbursement this Period 36.89
City El Segundo State CA Zip Code 90245	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109331 Date of Disbursement 04 / 05 / 2007
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 1360.28
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Amanda Bogden		Transaction ID: SB21B-108924 Date of Disbursement 04 / 05 / 2007
Mailing Address 1770 Columbia Rd. NW		Amount of Each Disbursement this Period 290.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1687.17
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-108930 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 22.48
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-108931 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 2.95
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Publication & Dues Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-108932 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 13.11
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Publication & Dues Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	38.54
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-108933 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 126.33
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-108934 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 45.24
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-108935 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 137.65
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	309.22
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-108936 Date of Disbursement MM / DD / YYYY 04 / 05 / 2007
Mailing Address Suite 0001		Amount of Each Disbursement this Period 1204.36
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-108937 Date of Disbursement MM / DD / YYYY 04 / 05 / 2007
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 911.57
City Newark State NJ Zip Code 07101-1270	See Attached Memo Entry	
Purpose of Disbursement Travel/Acom/Meals Internet Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-108938 Date of Disbursement MM / DD / YYYY 04 / 05 / 2007
Mailing Address Suite 0001		Amount of Each Disbursement this Period 30.15
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2146.08
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Bulletproof Full Name (Last, First, Middle Initial) Mailing Address 1840 41st Ave, #102-333 City Capitola State CA Zip Code 95010 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108946 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period: 56.25 Category/Type
--	--	--

B. Bulletproof Full Name (Last, First, Middle Initial) Mailing Address 1840 41st Ave, #102-333 City Capitola State CA Zip Code 95010 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108947 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period: 75.00 Category/Type
--	--	--

C. Capitol Prompting Service Full Name (Last, First, Middle Initial) Mailing Address PO Box 25024 City Arlington State VA Zip Code 22202 Purpose of Disbursement Equipment Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108948 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period: 1200.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1331.25
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Condor Communications		Transaction ID: SB21B-108951 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 5520 Connecticut Ave, NW		Amount of Each Disbursement this Period 20000.00
City Washington State DC Zip Code 20015	Category/ Type	
Purpose of Disbursement Consulting Communications		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Direct Advantage Marketing		Transaction ID: SB21B-108954 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 55043		Amount of Each Disbursement this Period 2235.50
City Boston State MA Zip Code 02205	Category/ Type	
Purpose of Disbursement Phone Banks		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Direct Advantage Marketing		Transaction ID: SB21B-108955 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 55043		Amount of Each Disbursement this Period 3506.25
City Boston State MA Zip Code 02205	Category/ Type	
Purpose of Disbursement Phone Banks		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	25741.75
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Chris Esposito		Transaction ID: SB21B-108959 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 624 East Broadway		Amount of Each Disbursement this Period 202.00
City Boston State MA Zip Code 02127	Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Getactive Software, Inc. Attn:Billing Dept		Transaction ID: SB21B-108961 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 2855 Telegraph Ave, Ste 200		Amount of Each Disbursement this Period 3000.00
City Berkeley State CA Zip Code 94705	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Hi-Tech Electric, LLC		Transaction ID: SB21B-108964 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 2230 W. Winton Ave		Amount of Each Disbursement this Period 4701.70
City Hayward State CA Zip Code 94545	Purpose of Disbursement Equipment Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	7903.70
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ikon Office Solutions		Transaction ID: SB21B-109360 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address P.O. Box 827468		Amount of Each Disbursement this Period 116.14
City Philadelphia State PA Zip Code 19182-7468		
Purpose of Disbursement Office Supplies Expenses Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Interstate Express		Transaction ID: SB21B-108968 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address PO Box 30091		Amount of Each Disbursement this Period 19.80	
City Bethesda State MD Zip Code 20824			
Purpose of Disbursement Deliveries Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Interstate Express		Transaction ID: SB21B-108969 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address PO Box 30091		Amount of Each Disbursement this Period 19.80	
City Bethesda State MD Zip Code 20824			
Purpose of Disbursement Deliveries Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	155.74
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Faith B. Kerr		Transaction ID: SB21B-108970 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 44 Summit Street		Amount of Each Disbursement this Period 14.00	
City Ivoryton State CT Zip Code 06442	Purpose of Disbursement Copy Writer Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Faith B. Kerr		Transaction ID: SB21B-108971 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 44 Summit Street		Amount of Each Disbursement this Period 14.00	
City Ivoryton State CT Zip Code 06442	Purpose of Disbursement Copy Writer Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Faith B. Kerr		Transaction ID: SB21B-108972 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 44 Summit Street		Amount of Each Disbursement this Period 14.00	
City Ivoryton State CT Zip Code 06442	Purpose of Disbursement Copy Writer Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	42.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Faith B. Kerr		Transaction ID: SB21B-108973 Date of Disbursement 04 / 05 / 2007	
Mailing Address 44 Summit Street		Amount of Each Disbursement this Period 14.00	
City Ivoryton State CT Zip Code 06442	Purpose of Disbursement Copy Writer Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. The Mellman Group		Transaction ID: SB21B-108976 Date of Disbursement 04 / 05 / 2007	
Mailing Address 1023 31st Street NW 5th Floor		Amount of Each Disbursement this Period 23.74	
City Washington State DC Zip Code 20007	Purpose of Disbursement Deliveries Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dan Ojalvo		Transaction ID: SB21B-108979 Date of Disbursement 04 / 05 / 2007	
Mailing Address 4252 Highland Dr.		Amount of Each Disbursement this Period 125.00	
City Shoreview State MN Zip Code 55126	Purpose of Disbursement Strategic Consulting Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	162.74
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-108985 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 4663.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RCI Sound Systems		Transaction ID: SB21B-108986 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 10721 Hanna Street		Amount of Each Disbursement this Period 5202.31
City Beltsville State MD Zip Code 20705		
Purpose of Disbursement Equipment Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Share Group		Transaction ID: SB21B-108989 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 125.74
City Boston State MA Zip Code 02205-5183		
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	9991.05
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-108992 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 250.00
City State Zip Code Centreville MD 21617	Purpose of Disbursement Design/Graphics Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-108993 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 150.00
City State Zip Code Centreville MD 21617	Purpose of Disbursement Design/Graphics Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Starfish Design Carolyn M. Coon		Transaction ID: SB21B-108994 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 106 Kidwell Avenue		Amount of Each Disbursement this Period 150.00
City State Zip Code Centreville MD 21617	Purpose of Disbursement Design/Graphics Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Triplex Direct Marketing		Transaction ID: SB21B-108995 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 3603		Amount of Each Disbursement this Period 2596.58
City Omaha State NE Zip Code 68103-0603	Purpose of Disbursement Data Management Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. United Parcel Service		Transaction ID: SB21B-108998 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 55.19
City Philadelphia State PA Zip Code 19170-0001	Purpose of Disbursement Deliveries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. United Parcel Service		Transaction ID: SB21B-109001 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 171.19
City Philadelphia State PA Zip Code 19170-0001	Purpose of Disbursement Deliveries Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2822.96
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mary Jane Volk		Transaction ID: SB21B-109003 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 541 E. Nelson Avenue		Amount of Each Disbursement this Period 78.00
City Alexandria State VA Zip Code 22301		
Purpose of Disbursement Travel/Accommodation /Meals	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Voter Activation Network LLC		Transaction ID: SB21B-109004 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 54 Regent Street		Amount of Each Disbursement this Period 1500.00
City Cambridge State MA Zip Code 02140		
Purpose of Disbursement Publication & Dues	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-109006 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 2142.31
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Postage	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3720.31
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-109007 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 326.24
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Postage Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-109008 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 7217.80
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Postage Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-109009 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 525.90
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Postage Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	8069.94
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-109010 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 1557.83
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Postage Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-109011 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 25024.29
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Postage Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Creative Impressions		Transaction ID: SB21B-109016 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 3408 North Pershing Drive		Amount of Each Disbursement this Period 7135.00
City Arlington State VA Zip Code 22201		
Purpose of Disbursement Catering/Facilities Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	33717.12
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Paychex Full Name (Last, First, Middle Initial) Mailing Address 3060 Williams Drive #300 City Fairfax State VA Zip Code 22031 Purpose of Disbursement Payroll Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109335 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Amount of Each Disbursement this Period: 454.28 Category/Type
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B. American Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 360001 City Ft Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement Equipment Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109050 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period: 771.00 See Attached Memo Entry Category/Type
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C. American Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 360001 City Ft Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109051 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period: 281.13 See Attached Memo Entry Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1506.41
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109052 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 389.34
City Ft Lauderdale	State FL Zip Code 33336-0001	
Purpose of Disbursement Travel/Accommodation /Meals		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109054 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 495.00
City Chicago	State IL Zip Code 60679-0001	
Purpose of Disbursement Meeting/Conference		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109058 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 217.58
City Ft Lauderdale	State FL Zip Code 33336-0001	
Purpose of Disbursement Office Supplies Expenses		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1101.92
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109059 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 42.16
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109060 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 250.00
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Publication & Dues		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109065 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 192.05
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	484.21
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109349 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 78451.66
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Travel/Accommodation /Meals/Catering/Fac		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109350 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 6010.53
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Catering/Facilities		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109351 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 11308.90
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Computer Services		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	95771.09
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109352 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 421.00
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Employee Recruitment		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109353 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 712.10
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Internet Services		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109354 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 303.72
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1436.82
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109355 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 1867.31
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109356 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 694.88
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109070 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 717.43
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3279.62
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109073 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 99.99
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Telephone Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109078 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 223.19
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109079 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 1.06
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	324.24
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109080 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 118.95
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109082 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 1105.94
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Postage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109083 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 2827.26
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4052.15
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109085 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 624.41
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Office Supplies Expenses		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109086 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 433.90
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Office Supplies Expenses		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109087 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 145.79
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Travel/Accommodation /Meals		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1204.10
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109088 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 534.04
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109089 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 456.32
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109090 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 1007.72
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1998.08
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109091 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 3056.75
City Ft Lauderdale	State FL Zip Code 33336-0001	
Purpose of Disbursement Travel/Accommodation /Meals		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109097 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 160.96
City Chicago	State IL Zip Code 60679-0001	
Purpose of Disbursement Office Supplies Expenses		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109098 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 52.72
City Chicago	State IL Zip Code 60679-0001	
Purpose of Disbursement Publication & Dues		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3270.43
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109099 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Suite 0001		Amount of Each Disbursement this Period 227.59
City Chicago State IL Zip Code 60679-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109107 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 420.05
City Ft. Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109108 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 188.33
City Ft. Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals/Office		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	835.97
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109109 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 2816.17
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		See Attached Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109111 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 876.67
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Copying/Faxing		
Candidate Name		See Attached Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109112 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 508.46
City Ft Lauderdale State FL Zip Code 33336-0001	Category/ Type	
Purpose of Disbursement Equipment Rental		
Candidate Name		See Attached Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4201.30
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109113 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 37.88
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B-109114 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 94.33
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109115 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 25.96
City Ft Lauderdale State FL Zip Code 33336-0001	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	158.17
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B-109120 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 228.94
City Ft Lauderdale	State FL Zip Code 33336-0001	
Purpose of Disbursement Travel/Accommodation /Meals		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Bulletproof		Transaction ID: SB21B-109126 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1840 41st Ave, #102-333		Amount of Each Disbursement this Period 30.00
City Capitola	State CA Zip Code 95010	
Purpose of Disbursement Copy Writer		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Bulletproof		Transaction ID: SB21B-109127 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1840 41st Ave, #102-333		Amount of Each Disbursement this Period 25.00
City Capitola	State CA Zip Code 95010	
Purpose of Disbursement Copy Writer		See Attached Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	283.94
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Andrea E Gottfried		Transaction ID: SB21B-109140 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 414 Wynnerwood Road		Amount of Each Disbursement this Period 614.04
City Pelham State NY Zip Code 10803	See Attached Memo Entry	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Andrea E Gottfried		Transaction ID: SB21B-109141 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 414 Wynnerwood Road		Amount of Each Disbursement this Period 120.00
City Pelham State NY Zip Code 10803	Category/ Type	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-109146 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 7.13
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	741.17
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-109147 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 28.46
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Deliveries Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-109148 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 1000.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-109149 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 141.12
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Deliveries Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1169.58
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-109758 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 1969.12
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Red Top Cab		Transaction ID: SB21B-109152 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address P.O. Box 100519		Amount of Each Disbursement this Period 75.56
City Arlington State VA Zip Code 22210		
Purpose of Disbursement Local Transportation Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Edna Romero		Transaction ID: SB21B-109153 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 7111 Halleck Street		Amount of Each Disbursement this Period 193.00
City District Heights State MD Zip Code 20747		
Purpose of Disbursement Local Transportation Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2237.68
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Edna Romero		Transaction ID: SB21B-109154 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 7111 Halleck Street		Amount of Each Disbursement this Period 78.97
City District Heights	State MD	
Zip Code 20747	Category/Type	
Purpose of Disbursement Travel/Accommodations/Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Sheads & Associates, Ltd.		Transaction ID: SB21B-109155 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address Prince William Square 303 Post Office Rd. Bldg A		Amount of Each Disbursement this Period 2710.29
City Waldorf	State MD	
Zip Code 20602	Category/Type	
Purpose of Disbursement Contribution Processing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Triplex Direct Marketing		Transaction ID: SB21B-109158 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address PO Box 3603		Amount of Each Disbursement this Period 10613.57
City Omaha	State NE	
Zip Code 68103-0603	Category/Type	
Purpose of Disbursement List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	13402.83
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. WebSideStory		Transaction ID: SB21B-109161 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address Dept. 33793 P.O. Box 39000		Amount of Each Disbursement this Period 4961.50
City San Francisco State CA Zip Code 94139		
Purpose of Disbursement Internet Services Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. GSI - Gordon & Schwenkmeyer		Transaction ID: SB21B-109635 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 300 N Sepulveda Blvd #2050		Amount of Each Disbursement this Period 4168.42
City El Segundo State CA Zip Code 90245		
Purpose of Disbursement Phone Banks Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: SB21B-109334 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 3060 Williams Drive #300		Amount of Each Disbursement this Period 54.00
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Payroll Service Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	9183.92
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Condor Communications Full Name (Last, First, Middle Initial) Mailing Address 5520 Connecticut Ave, NW City Washington State DC Zip Code 20015 Purpose of Disbursement Equipment Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109162 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7 Amount of Each Disbursement this Period: 22341.43 Category/Type
---	--	---

B. Bank of America Full Name (Last, First, Middle Initial) Mailing Address 1501 Pennsylvania Ave. NW City Washington State DC Zip Code 20005 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109333 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period: 1614.16 Category/Type
--	--	--

C. CELCO Full Name (Last, First, Middle Initial) Mailing Address 9663-C Main Street City Fairfax State VA Zip Code 22032 Purpose of Disbursement Data Management Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109174 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period: 895.06 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	24850.65
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109175 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 73.57
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109176 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 57.27
City Fairfax State VA Zip Code 22032	Purpose of Disbursement List Rental Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109177 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 51.43
City Fairfax State VA Zip Code 22032	Purpose of Disbursement List Rental Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	182.27
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109178 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 70.45
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109179 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 1842.12
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109180 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 108.91
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement Data Management Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2021.48
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109181 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 88.03
City Fairfax State VA Zip Code 22032	Category/Type	
Purpose of Disbursement Data Management		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109182 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 430.32
City Fairfax State VA Zip Code 22032	Category/Type	
Purpose of Disbursement Data Management		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109183 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 18.14
City Fairfax State VA Zip Code 22032	Category/Type	
Purpose of Disbursement Data Management		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	536.49
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109184 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 23.99
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109185 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 7.68
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109186 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 53.06
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	84.73
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109187 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 93.25
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109188 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 46.34
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109189 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 22.16
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	161.75
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109190 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 164.69
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109191 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 31.88
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109192 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 291.84
City Fairfax State VA Zip Code 22032	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	488.41
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. CELCO Full Name (Last, First, Middle Initial) Mailing Address 9663-C Main Street City Fairfax State VA Zip Code 22032 Purpose of Disbursement Data Management Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109193 Date of Disbursement 04 / 19 / 2007 Amount of Each Disbursement this Period 8.89 Category/Type
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B. CustomScoop Full Name (Last, First, Middle Initial) Mailing Address PO Box 609 City Concord State NH Zip Code 03302 Purpose of Disbursement Publication & Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109196 Date of Disbursement 04 / 19 / 2007 Amount of Each Disbursement this Period 750.00 Category/Type
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C. CustomScoop Full Name (Last, First, Middle Initial) Mailing Address PO Box 609 City Concord State NH Zip Code 03302 Purpose of Disbursement Publication & Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109197 Date of Disbursement 04 / 19 / 2007 Amount of Each Disbursement this Period 750.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1508.89
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Direct Advantage Marketing		Transaction ID: SB21B-109198 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address PO Box 55043		Amount of Each Disbursement this Period 1202.75
City Boston State MA Zip Code 02205	Purpose of Disbursement Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Gordon and Schwenkmeyer, Inc.		Transaction ID: SB21B-109203 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 300 N. Sepulveda Blvd. Suite 2050		Amount of Each Disbursement this Period 3522.92
City El Segundo State CA Zip Code 90245	Purpose of Disbursement Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Gordon and Schwenkmeyer, Inc.		Transaction ID: SB21B-109204 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 300 N. Sepulveda Blvd. Suite 2050		Amount of Each Disbursement this Period 2109.80
City El Segundo State CA Zip Code 90245	Purpose of Disbursement Phone Banks Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6835.47
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Gordon and Schwenkmeyer, Inc. Full Name (Last, First, Middle Initial) Mailing Address 300 N. Sepulveda Blvd. Suite 2050 City El Segundo State CA Zip Code 90245 Purpose of Disbursement Phone Banks Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109205 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007 Amount of Each Disbursement this Period 11479.15 Category/Type
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B. Interstate Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 30091 City Bethesda State MD Zip Code 20824 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109206 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007 Amount of Each Disbursement this Period 19.80 Category/Type
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C. Interstate Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 30091 City Bethesda State MD Zip Code 20824 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109207 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007 Amount of Each Disbursement this Period 19.80 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	11518.75
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Interstate Express		Transaction ID: SB21B-109208 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 30091		Amount of Each Disbursement this Period 19.80
City Bethesda State MD Zip Code 20824	Category/ Type	
Purpose of Disbursement Deliveries		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Laila Mohib		Transaction ID: SB21B-109211 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address 616 E Street N.W. Apt 712		Amount of Each Disbursement this Period 40.00
City Washington State DC Zip Code 20004	Category/ Type	
Purpose of Disbursement Telephone		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

See Attached Memo Entry

Full Name (Last, First, Middle Initial) C. Pacific East		Transaction ID: SB21B-109212 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 439		Amount of Each Disbursement this Period 50.00
City Sumas State WA Zip Code 98295-0439	Category/ Type	
Purpose of Disbursement Data Management		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	109.80
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Pacific East		Transaction ID: SB21B-109213 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 439		Amount of Each Disbursement this Period 200.00
City Sumas State WA Zip Code 98295-0439	Category/ Type	
Purpose of Disbursement Data Management Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Pacific East		Transaction ID: SB21B-109214 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 439		Amount of Each Disbursement this Period 250.00
City Sumas State WA Zip Code 98295-0439	Category/ Type	
Purpose of Disbursement Data Management Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Pacific East		Transaction ID: SB21B-109215 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 439		Amount of Each Disbursement this Period 250.00
City Sumas State WA Zip Code 98295-0439	Category/ Type	
Purpose of Disbursement Data Management Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Preeminent Protective Services		Transaction ID: SB21B-109216 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 1050 17th Street, NW Suite 600		Amount of Each Disbursement this Period 1100.00
City Washington State DC Zip Code 20036		
Purpose of Disbursement Equipment Rental Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-109217 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 97.36
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Deliveries Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-109218 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 1000.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2197.36
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Public Interest Communications Full Name (Last, First, Middle Initial) Mailing Address 7700 Leesburg Pike Suite 301 North City Falls Church State VA Zip Code 22043 Purpose of Disbursement Phone Banks Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109219 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period: 550.00 Category/Type
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B. Rackspace Managed Hosting Full Name (Last, First, Middle Initial) Mailing Address PO Box 671337 City Dallas State TX Zip Code 75267-1337 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109220 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period: 1350.00 Category/Type
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C. Rebecca Hughes Runyan Full Name (Last, First, Middle Initial) Mailing Address 1503 30th Street NW Apt 1 City Washington State DC Zip Code 20007 Purpose of Disbursement Local Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109221 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period: 36.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	1936.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Janine E Salalac Full Name (Last, First, Middle Initial) Mailing Address 18031 Mark Lane City Yorba Linda State CA Zip Code 92886 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109222 Date of Disbursement 04 / 19 / 2007 Amount of Each Disbursement this Period 86.00 Category/ Type
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B. Patricia Seitz Full Name (Last, First, Middle Initial) Mailing Address 617 14th Street, N.E. City Washington State DC Zip Code 20002 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109223 Date of Disbursement 04 / 19 / 2007 Amount of Each Disbursement this Period 30.00 Category/ Type
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C. Triplex Direct Marketing Full Name (Last, First, Middle Initial) Mailing Address PO Box 3603 City Omaha State NE Zip Code 68103-0603 Purpose of Disbursement Data Management Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109225 Date of Disbursement 04 / 19 / 2007 Amount of Each Disbursement this Period 105.76 Category/ Type
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SUBTOTAL of Disbursements This Page (optional) ▶	221.76
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Triplex Direct Marketing		Transaction ID: SB21B-109226 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 3603		Amount of Each Disbursement this Period 217.40
City Omaha State NE Zip Code 68103-0603	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Triplex Direct Marketing		Transaction ID: SB21B-109227 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 3603		Amount of Each Disbursement this Period 73.76
City Omaha State NE Zip Code 68103-0603	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Triplex Direct Marketing		Transaction ID: SB21B-109228 Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 3603		Amount of Each Disbursement this Period 55.00
City Omaha State NE Zip Code 68103-0603	Purpose of Disbursement Data Management Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	346.16
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kaiya Waddell		Transaction ID: SB21B-109230 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 7960 Money Rd		Amount of Each Disbursement this Period 24.14
City Napa State CA Zip Code 94558	Purpose of Disbursement Event Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Jennifer Williams		Transaction ID: SB21B-109231 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 1520 12th Street B		Amount of Each Disbursement this Period 15.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B-109332 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 2144.99
City Chicago State IL Zip Code 60679	Purpose of Disbursement Credit Card Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2184.13
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Yolanda Covington		Transaction ID: SB21B-109326 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 459 Massachusetts Ave, NW		Amount of Each Disbursement this Period 77.25
City Washington State DC Zip Code 20001	Purpose of Disbursement Temporary Help Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Mary K Phillips		Transaction ID: SB21B-109327 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 459 Massachusetts Ave NW		Amount of Each Disbursement this Period 77.25
City Washington State DC Zip Code 20001	Purpose of Disbursement Temporary Help Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Rebecca Turner		Transaction ID: SB21B-109328 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 459 Massachusetts Ave NW		Amount of Each Disbursement this Period 77.25
City Washington State DC Zip Code 20001	Purpose of Disbursement Temporary Help Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	231.75
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jack I. Bender & Sons Full Name (Last, First, Middle Initial) Mailing Address 1120 Connecticut Ave, NW Suite 1200 City Washington State DC Zip Code 20036 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB21B-109363 Date of Disbursement 04 / 26 / 2007 Amount of Each Disbursement this Period 4200.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Bulletproof Full Name (Last, First, Middle Initial) Mailing Address 1840 41st Ave, #102-333 City Capitola State CA Zip Code 95010 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB21B-109365 Date of Disbursement 04 / 26 / 2007 Amount of Each Disbursement this Period 80.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Bulletproof Full Name (Last, First, Middle Initial) Mailing Address 1840 41st Ave, #102-333 City Capitola State CA Zip Code 95010 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: SB21B-109366 Date of Disbursement 04 / 26 / 2007 Amount of Each Disbursement this Period 40.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4320.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Bulletproof Full Name (Last, First, Middle Initial) Mailing Address 1840 41st Ave, #102-333 City Capitola State CA Zip Code 95010 Purpose of Disbursement Copy Writer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109367 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 65.00 Category/Type
---	--	--

B. CELCO Full Name (Last, First, Middle Initial) Mailing Address 9663-C Main Street City Fairfax State VA Zip Code 22032 Purpose of Disbursement List Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109369 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 91.01 Category/Type
---	--	--

C. CELCO Full Name (Last, First, Middle Initial) Mailing Address 9663-C Main Street City Fairfax State VA Zip Code 22032 Purpose of Disbursement List Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109370 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 17.45 Category/Type
---	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	173.46
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109371 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 7.40
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109372 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 175.92
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109373 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 72.71
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	256.03
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109374 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 43.79
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109375 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 95.28
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109376 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 63.25
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

202.32

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109377 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 200.82
City Fairfax State VA Zip Code 22032	Category/ Type	
Purpose of Disbursement List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109378 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 181.64
City Fairfax State VA Zip Code 22032	Category/ Type	
Purpose of Disbursement List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109379 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 138.08
City Fairfax State VA Zip Code 22032	Category/ Type	
Purpose of Disbursement List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	520.54
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109380 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">351.13</div>
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109381 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">967.59</div>
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109382 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">2562.11</div>
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; text-align: right;">3880.83</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 5px; text-align: right;"> </div>

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109383 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 2037.77
City Fairfax State VA Zip Code 22032	Category/ Type	
Purpose of Disbursement List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109384 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 32.16
City Fairfax State VA Zip Code 22032	Category/ Type	
Purpose of Disbursement List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109385 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 11.58
City Fairfax State VA Zip Code 22032	Category/ Type	
Purpose of Disbursement List Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2081.51
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109386 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 93.76
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109387 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 79.61
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109388 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 231.52
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	404.89
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109389 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 263.05
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109390 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 57.17
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109391 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 19.67
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	339.89
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 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109392 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 27.93
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109393 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 22.67	
City Fairfax State VA Zip Code 22032			
Purpose of Disbursement List Rental Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109394 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 30.60	
City Fairfax State VA Zip Code 22032			
Purpose of Disbursement List Rental Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	81.20
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109395 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 615.88
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109396 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 1688.11
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109397 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 363.17
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2667.16
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. CELCO		Transaction ID: SB21B-109398 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 644.09
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CELCO		Transaction ID: SB21B-109399 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 551.84
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CELCO		Transaction ID: SB21B-109400 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9663-C Main Street		Amount of Each Disbursement this Period 1075.31
City Fairfax State VA Zip Code 22032		
Purpose of Disbursement List Rental	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ► **2271.24**

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cingular Wireless		Transaction ID: SB21B-109401 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address PO Box 17356		Amount of Each Disbursement this Period 169.22
City Baltimore State MD Zip Code 21297-1356	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Colonial Parking, Inc.		Transaction ID: SB21B-109403 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1050 Thomas Jefferson St., NW #100		Amount of Each Disbursement this Period 630.00
City Washington State DC Zip Code 20007	Purpose of Disbursement Parking Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Kellie Dupree		Transaction ID: SB21B-109405 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1644 Florida Ave. N.W.		Amount of Each Disbursement this Period 200.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	999.22
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Emily Elbert		Transaction ID: SB21B-109406 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9172 Robin Court		Amount of Each Disbursement this Period 99.00
City Brentwood State MO Zip Code 63144	Category/ Type	
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Interstate Express		Transaction ID: SB21B-109419 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address PO Box 30091		Amount of Each Disbursement this Period 39.60
City Bethesda State MD Zip Code 20824	Category/ Type	
Purpose of Disbursement Deliveries		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Interstate Express		Transaction ID: SB21B-109420 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address PO Box 30091		Amount of Each Disbursement this Period 19.80
City Bethesda State MD Zip Code 20824	Category/ Type	
Purpose of Disbursement Deliveries		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	158.40
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Sherry Merfish		Transaction ID: SB21B-109426 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address EMILY's List-TX 2720 Pittsburg Street		Amount of Each Disbursement this Period 63.30
City Houston	State TX	
Zip Code 77005		Category/ Type
Purpose of Disbursement Travel/Accommodation /Meals		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Merkle Response Services Inc		Transaction ID: SB21B-109428 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 13331 Pennsylvania Ave		Amount of Each Disbursement this Period 860.07
City Hagerstown	State MD	
Zip Code 21742		Category/ Type
Purpose of Disbursement Data Management		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Merkle Response Services Inc		Transaction ID: SB21B-109429 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 13331 Pennsylvania Ave		Amount of Each Disbursement this Period 113.75
City Hagerstown	State MD	
Zip Code 21742		Category/ Type
Purpose of Disbursement Data Management		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	1037.12
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. PR Newswire Assoc, LLC		Transaction ID: SB21B-109430
Mailing Address G.P.O. Box 5897		Date of Disbursement MM / DD / YYYY 04 / 26 / 2007
City New York	State NY	Zip Code 10087-5897
Purpose of Disbursement Publication & Dues	Amount of Each Disbursement this Period 914.74	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-109432
Mailing Address 1953 Gallows Road Suite 600		Date of Disbursement MM / DD / YYYY 04 / 26 / 2007
City Vienna	State VA	Zip Code 22182
Purpose of Disbursement Printing	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-109433
Mailing Address 1953 Gallows Road Suite 600		Date of Disbursement MM / DD / YYYY 04 / 26 / 2007
City Vienna	State VA	Zip Code 22182
Purpose of Disbursement Deliveries	Amount of Each Disbursement this Period 284.81	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2199.55
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Transaction ID: SB21B-109434 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 1331.20
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Direct Mail Expense Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Transaction ID: SB21B-109435 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 850.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Transaction ID: SB21B-109437 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1953 Gallows Road Suite 600		Amount of Each Disbursement this Period 890.00
City Vienna State VA Zip Code 22182		
Purpose of Disbursement Printing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3071.20
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Production Solutions, Inc. Full Name (Last, First, Middle Initial) Mailing Address 1953 Gallows Road Suite 600 City Vienna State VA Zip Code 22182 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109759 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 47.02 Category/Type
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B. Red Top Cab Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 100519 City Arlington State VA Zip Code 22210 Purpose of Disbursement Local Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109438 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 102.87 Category/Type
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C. Share Group Full Name (Last, First, Middle Initial) Mailing Address PO Box 55183 City Boston State MA Zip Code 02205-5183 Purpose of Disbursement Phone Banks Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109440 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 2246.40 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	2396.29
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Staples Full Name (Last, First, Middle Initial) Mailing Address Dept DC 85105 PO Box 30851 City Hartford State CT Zip Code 06150-0851 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109444 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 12.01 Category/Type
--	--	--

B. Staples Full Name (Last, First, Middle Initial) Mailing Address Dept DC 85105 PO Box 30851 City Hartford State CT Zip Code 06150-0851 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109445 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 71.14 Category/Type
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C. United Parcel Service Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 7247-0244 City Philadelphia State PA Zip Code 19170-0001 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109449 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period: 42.21 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	125.36
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: SB21B-109450 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address P. O. Box 7247-0244		Amount of Each Disbursement this Period 82.51
City Philadelphia State PA Zip Code 19170-0001		
Purpose of Disbursement Deliveries Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Patricia Williams		Transaction ID: SB21B-109457 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 3 Wyndham Drive		Amount of Each Disbursement this Period 42.70
City Portola Valley State CA Zip Code 94028		
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: SB21B-109546 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 3060 Williams Drive #300		Amount of Each Disbursement this Period 503.58
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Taxes - Payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	628.79
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Au Bon Pain		Transaction ID: SB21B-108930-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 1732 L Street NW		Amount of Each Disbursement this Period 22.48	
City Washington State DC Zip Code 20036	Purpose of Disbursement Travel/Accommodation /Meals	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) B. CNN Pipeline		Transaction ID: SB21B-108931-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address One CNN Center		Amount of Each Disbursement this Period 2.95	
City Atlanta State GA Zip Code 30303	Purpose of Disbursement Publication & Dues	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) C. New York Times		Transaction ID: SB21B-108932-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 229 West 43rd Street		Amount of Each Disbursement this Period 13.11	
City New York State NY Zip Code 10036	Purpose of Disbursement Publication & Dues	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	[MEMO ITEM]		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Barmy Wines Full Name (Last, First, Middle Initial) Mailing Address 1912 L St NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108933-10000 Date of Disbursement MM / DD / YYYY 04 / 05 / 2007 Amount of Each Disbursement this Period 105.38 [MEMO ITEM]
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B. CVS Full Name (Last, First, Middle Initial) Mailing Address 1025 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108933-20000 Date of Disbursement MM / DD / YYYY 04 / 05 / 2007 Amount of Each Disbursement this Period 20.95 [MEMO ITEM]
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C. Au Bon Pain Full Name (Last, First, Middle Initial) Mailing Address 1732 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108934-10000 Date of Disbursement MM / DD / YYYY 04 / 05 / 2007 Amount of Each Disbursement this Period 45.24 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Foxglove Flowers Full Name (Last, First, Middle Initial) Mailing Address 1535 N Quaker Lane City Alexandria State VA Zip Code 22302 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108935-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 137.65 [MEMO ITEM]
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B. Acadiana Full Name (Last, First, Middle Initial) Mailing Address 901 New York Ave City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108936-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 878.10 [MEMO ITEM]
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C. Daily Grill Full Name (Last, First, Middle Initial) Mailing Address 1200 18th Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108936-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 326.26 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Tortilla Cost Full Name (Last, First, Middle Initial) Mailing Address 400 First Street SE City Washington State DC Zip Code 20003 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108937-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 31.13 [MEMO ITEM]
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B. Henley Park Hotel Full Name (Last, First, Middle Initial) Mailing Address 926 Massachusetts Ave nw City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108937-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 235.86 [MEMO ITEM]
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C. United Airlines Full Name (Last, First, Middle Initial) Mailing Address PO Box 66100 City Chicago State IL Zip Code 60666 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108937-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 200.80 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dorla Abbott Full Name (Last, First, Middle Initial) Mailing Address 6744 South Howell Avenue City Oak Creek State WI Zip Code 53154 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108937-40000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 428.79 [MEMO ITEM]
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B. Real.com Full Name (Last, First, Middle Initial) Mailing Address PO Box 91123 City Seattle State WA Zip Code 98111 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108937-50000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 14.99 [MEMO ITEM]
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C. Mackeys Full Name (Last, First, Middle Initial) Mailing Address 1823 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-108938-10000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Amount of Each Disbursement this Period 30.15 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

<p>A. Atlantic Valet</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2175 K St NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Equipment Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109050-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="420.50"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Atlantic Valet</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2175 K St NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Equipment Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109050-15000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="350.50"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. California Pizza Kitchen</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1260 Connecticut Ave NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109051-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="76.93"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

<p>A. Mackeys</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1823 L Street NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109051-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="204.20"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. The Cosmopolitan</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 121 Spear St # B8</p> <p>City San Francisco State CA Zip Code 94105</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109052-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.39"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Sir Francis Drake Hotel</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 450 Powell St</p> <p>City San Francisco State CA Zip Code 94102</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109052-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="22.41"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Lori's Diner		Transaction ID: SB21B-109052-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Internal Airport		Amount of Each Disbursement this Period 10.49
City San Francisco State CA Zip Code 94066	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Starbucks		Transaction ID: SB21B-109052-40000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 3595 California St		Amount of Each Disbursement this Period 8.30
City San Francisco State CA Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Scala's Cafe		Transaction ID: SB21B-109052-60000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 432 Powell St		Amount of Each Disbursement this Period 175.17
City San Francisco State CA Zip Code 94102	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. US Airways Full Name (Last, First, Middle Initial) Mailing Address 4000 E. Sky Harbor Blvd City Phoenix State AZ Zip Code 85034 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109052-80000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
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B. Paradies Full Name (Last, First, Middle Initial) Mailing Address 3400 E Sky Harbor Blvd City Phoenix State AZ Zip Code 95034 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109052-90000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 3.94 [MEMO ITEM]
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C. Sotano Grill Full Name (Last, First, Middle Initial) Mailing Address 550 Powell St City San Francisco State CA Zip Code 94102 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109052-110000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 33.64 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. PoliticsOnline Full Name (Last, First, Middle Initial) Mailing Address 805 21st St. Suite 401 City Washington State DC Zip Code 20052 Purpose of Disbursement Meeting/Conference Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109054-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 495.00 [MEMO ITEM]
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B. L'Occitane Full Name (Last, First, Middle Initial) Mailing Address 5135 W Alabama St City Houston State TX Zip Code 77056 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109058-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 217.58 [MEMO ITEM]
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C. Office Depot Full Name (Last, First, Middle Initial) Mailing Address PO Box 633211 City Cincinnati State OH Zip Code 45263-3211 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109059-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 42.16 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Right Click Strategies		Transaction ID: SB21B-109060-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1140 Connecticut Ave Nw		Amount of Each Disbursement this Period 250.00
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Publication & Dues		Category/ Type
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. American Airlines		Transaction ID: SB21B-109065-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 619612		Amount of Each Disbursement this Period 100.00
City DFW Airport State TX Zip Code 75261	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Yellow Cab		Transaction ID: SB21B-109065-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 2515 S Irving Blvd		Amount of Each Disbursement this Period 42.05
City Ft. Worth State TX Zip Code 75207	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

<p>A. Ten Penh</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1001 Pennsylvania Avenue, NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109065-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Beacon Bar & Grill</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1615 Rhode Island Ave NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109070-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.15"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Dunkin Donuts</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 51 Main St</p> <p>City Westbrook State ME Zip Code 04092</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109070-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14.84"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Hudson News Full Name (Last, First, Middle Initial) Mailing Address: Manchester Boston Reg Apt 1 Airport Rd # 300 City: Manchester State: NH Zip Code: 03103 Purpose of Disbursement: Travel/Accommodation /Meals Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109070-30000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 13.93 [MEMO ITEM]
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B. Doubletree Hotel Full Name (Last, First, Middle Initial) Mailing Address: 1515 Rhode Island Ave NW City: Washington State: DC Zip Code: 20005 Purpose of Disbursement: Travel/Accommodation /Meals Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109070-40000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 313.41 [MEMO ITEM]
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C. Whole Foods Full Name (Last, First, Middle Initial) Mailing Address: 1440 P St NW City: Washington State: DC Zip Code: 20005 Purpose of Disbursement: Travel/Accommodation /Meals Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109070-50000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 37.83 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

<p>A. Fossil Cafe</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 800 3rd St NE</p> <p>City Washington State DC Zip Code 20025</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109070-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11.44"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Union Station</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Columbus Cir at Mass Ave</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109070-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7.88"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Manchester Airport</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1 Airport Rd</p> <p>City Manchester State NH Zip Code 03103</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109070-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. NBL Sedan and Limo Full Name (Last, First, Middle Initial) Mailing Address BWI Airport City Baltimore State MD Zip Code 21240 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109070-90000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
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B. Amtrak Full Name (Last, First, Middle Initial) Mailing Address 60 Mass Ave NW City Washington State DC Zip Code 20002 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109070-100000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 40.00 [MEMO ITEM]
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C. Milltowne Grille Full Name (Last, First, Middle Initial) Mailing Address 1 Airport Rd # 200 City Manchester State NH Zip Code 03103 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109070-110000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 55.95 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Toll Free Communication Full Name (Last, First, Middle Initial) Mailing Address 42255 Chase Dr City Canton State MI Zip Code 48188 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109073-10000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 99.99 [MEMO ITEM]
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B. Staples Full Name (Last, First, Middle Initial) Mailing Address 19th & L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109078-10000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 146.00 [MEMO ITEM]
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C. CVS Full Name (Last, First, Middle Initial) Mailing Address 1025 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies/Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109078-20000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 3.16 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Kinkos		Transaction ID: SB21B-109078-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1612 K St Nw		Amount of Each Disbursement this Period 74.03
City Washington State DC Zip Code 20006	[MEMO ITEM]	
Purpose of Disbursement Office Supplies/Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Kinkos		Transaction ID: SB21B-109079-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1612 K St Nw		Amount of Each Disbursement this Period 1.06
City Washington State DC Zip Code 20006	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Chipotle		Transaction ID: SB21B-109080-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1837 M St NW		Amount of Each Disbursement this Period 42.96
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. High Noon Full Name (Last, First, Middle Initial) Mailing Address 1200 19th Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109080-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 75.99 [MEMO ITEM]
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B. US Postmaster Full Name (Last, First, Middle Initial) Mailing Address 1400 L Street NW City Washington State DC Zip Code 20005 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109082-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 1105.94 [MEMO ITEM]
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C. Cassis Travel Full Name (Last, First, Middle Initial) Mailing Address 535 5th Avenue City New York State NY Zip Code 10017 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Cassis Travel Full Name (Last, First, Middle Initial) Mailing Address 535 5th Avenue City New York State NY Zip Code 10017 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-60000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
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B. Cassis Travel Full Name (Last, First, Middle Initial) Mailing Address 535 5th Avenue City New York State NY Zip Code 10017 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-70000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
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C. Whitehall hotel Full Name (Last, First, Middle Initial) Mailing Address 105 E Delaware PI City Chicago State IL Zip Code 60611 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-80000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 216.66 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

<p>A. National Airport Parking</p> <p>Full Name (Last, First, Middle Initial) Mailing Address Aviation Circle</p>		<p>Transaction ID: SB21B-109083-90000 Date of Disbursement 04 / 11 / 2007</p>
<p>City Washington State DC Zip Code 20001</p>		<p>Amount of Each Disbursement this Period 72.00</p>
<p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p>		<p>[MEMO ITEM]</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>B. Delta Airlines</p> <p>Full Name (Last, First, Middle Initial) Mailing Address PO Box 20706</p>		<p>Transaction ID: SB21B-109083-100000 Date of Disbursement 04 / 11 / 2007</p>
<p>City Atlanta State GA Zip Code 30320</p>		<p>Amount of Each Disbursement this Period 618.80</p>
<p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p>		<p>[MEMO ITEM]</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>C. US Airways</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 4000 E. Sky Harbor Blvd</p>		<p>Transaction ID: SB21B-109083-110000 Date of Disbursement 04 / 11 / 2007</p>
<p>City Phoenix State AZ Zip Code 85034</p>		<p>Amount of Each Disbursement this Period 341.15</p>
<p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p>		<p>[MEMO ITEM]</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Cassis Travel Full Name (Last, First, Middle Initial) Mailing Address 535 5th Avenue City New York State NY Zip Code 10017 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-120000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 40.00 [MEMO ITEM]
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B. Cassis Travel Full Name (Last, First, Middle Initial) Mailing Address 535 5th Avenue City New York State NY Zip Code 10017 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-130000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
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C. Cassis Travel Full Name (Last, First, Middle Initial) Mailing Address 535 5th Avenue City New York State NY Zip Code 10017 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-140000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. National Airport Parking Full Name (Last, First, Middle Initial) Mailing Address Aviation Circle City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-150000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 17.00 [MEMO ITEM]
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B. BLS Limousine Full Name (Last, First, Middle Initial) Mailing Address 1820 Steinway St City Astoria State NY Zip Code 11105 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-160000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 140.10 [MEMO ITEM]
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C. Cassis Travel Full Name (Last, First, Middle Initial) Mailing Address 535 5th Avenue City New York State NY Zip Code 10017 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-170000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 35.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Siena Full Name (Last, First, Middle Initial) Mailing Address 6203 N Capital of Texas # B City Austin State TX Zip Code 78731 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-180000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 151.10 [MEMO ITEM]
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B. BLS Limousine Full Name (Last, First, Middle Initial) Mailing Address 1820 Steinway St City Astoria State NY Zip Code 11105 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-185000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 140.10 [MEMO ITEM]
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C. Omni Austin Full Name (Last, First, Middle Initial) Mailing Address 700 San Jacinto Blvd City Austin State TX Zip Code 78701 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-200000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 8.19 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Omni Austin Full Name (Last, First, Middle Initial) Mailing Address 700 San Jacinto Blvd City Austin State TX Zip Code 78701 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-205000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 308.86 [MEMO ITEM]
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B. Hilton Full Name (Last, First, Middle Initial) Mailing Address 6633 Travis St City Houston State TX Zip Code 77030 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109083-220000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 563.30 [MEMO ITEM]
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C. Shop For Awards.com Full Name (Last, First, Middle Initial) Mailing Address 2930 Chimney Rock Rd #200 City Houston State TX Zip Code 77056 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109085-10000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 115.60 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Diverse Office Solutions Full Name (Last, First, Middle Initial) Mailing Address 9228 Gaither Rd City Gaithersburg State MD Zip Code 20877 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109085-20000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 436.94 [MEMO ITEM]
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B. Staples Full Name (Last, First, Middle Initial) Mailing Address 19th & L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109085-30000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 71.87 [MEMO ITEM]
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C. Staples Full Name (Last, First, Middle Initial) Mailing Address 1025 Wayne Ave City Chambersburg State PA Zip Code 17201 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109086-10000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 433.90 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Luna Grill		Transaction ID: SB21B-109087-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1301 Connecticut Ave NW		Amount of Each Disbursement this Period 64.62
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Armand's Pizza		Transaction ID: SB21B-109087-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 226 Massachusetts Ave NE		Amount of Each Disbursement this Period 81.17
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Sir Speedy		Transaction ID: SB21B-109088-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1300 Connecticut Avenue NW		Amount of Each Disbursement this Period 534.04
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

<p>A. Sir Speedy</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1300 Connecticut Avenue NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109089-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="456.32"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Sir Speedy</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1300 Connecticut Avenue NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109090-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1007.72"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Hotels.com</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 8140 Walnut Hill Lane</p> <p>City Dallas State TX Zip Code 75231</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-109091-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="605.93"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Henley Park Hotel		Transaction ID: SB21B-109091-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 926 Massachusetts Ave NW		Amount of Each Disbursement this Period 430.52
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Henley Park Hotel		Transaction ID: SB21B-109091-25000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 926 Massachusetts Ave NW		Amount of Each Disbursement this Period 858.75
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Henley Park Hotel		Transaction ID: SB21B-109091-32500 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 926 Massachusetts Ave NW		Amount of Each Disbursement this Period 272.51
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Henley Park Hotel Full Name (Last, First, Middle Initial) Mailing Address 926 Massachusetts Ave NW City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109091-41250 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 243.26 [MEMO ITEM]
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B. Henley Park Hotel Full Name (Last, First, Middle Initial) Mailing Address 926 Massachusetts Ave NW City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109091-60000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 215.26 [MEMO ITEM]
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C. Henley Park Hotel Full Name (Last, First, Middle Initial) Mailing Address 926 Massachusetts Ave NW City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109091-70000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 215.26 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Henley Park Hotel Full Name (Last, First, Middle Initial) Mailing Address 926 Massachusetts Ave NW City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109091-80000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 215.26 [MEMO ITEM]
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B. AMAZON.COM Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 80463 City SEATTLE State WA Zip Code 98108 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109097-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 60.97 [MEMO ITEM]
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C. Verizon Wireless Full Name (Last, First, Middle Initial) Mailing Address PO Box 17464 City Baltimore State MD Zip Code 21297-1464 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109097-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 99.99 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

<p>A. New York Times</p> <p>Full Name (Last, First, Middle Initial) New York Times</p> <p>Mailing Address 229 West 43rd Street</p> <p>City New York State NY Zip Code 10036</p> <p>Purpose of Disbursement Publication & Dues</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB21B-109098-10000</p> <p>Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 49.60</p> <p>[MEMO ITEM]</p>
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<p>B. The Wall Street Journal</p> <p>Full Name (Last, First, Middle Initial) The Wall Street Journal</p> <p>Mailing Address 200 Burnett Rd. P. O. Box 240</p> <p>City Chicopee State MA Zip Code 01021-0900</p> <p>Purpose of Disbursement Publication & Dues</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB21B-109098-20000</p> <p>Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 3.12</p> <p>[MEMO ITEM]</p>
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<p>C. DOUBLETREE HOTEL</p> <p>Full Name (Last, First, Middle Initial) DOUBLETREE HOTEL</p> <p>Mailing Address 1515 RHODE ISLAND AVE NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement Travel/Accommodation /Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB21B-109099-10000</p> <p>Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 227.59</p> <p>[MEMO ITEM]</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. US Airways		Transaction ID: SB21B-109107-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 270.79
City Phoenix State AZ Zip Code 85034	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. HMS Host		Transaction ID: SB21B-109107-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 3033 North Miami Avenue		Amount of Each Disbursement this Period 2.13
City Miami State FL Zip Code 33127	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Whole Foods		Transaction ID: SB21B-109107-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1440 P St NW		Amount of Each Disbursement this Period 12.28
City Washington State DC Zip Code 20005	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Expedia		Transaction ID: SB21B-109107-40000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 13810 SE Eastgate Way		Amount of Each Disbursement this Period 5.00
City Bellevue State WA Zip Code 98005	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Wayport.net		Transaction ID: SB21B-109107-50000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 4509 Freidrich Lane Building III Suite 300		Amount of Each Disbursement this Period 19.90
City Austin State TX Zip Code 78744	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Doubtree Hotel		Transaction ID: SB21B-109107-60000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1515 Rhode Island Ave NW		Amount of Each Disbursement this Period 109.95
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: SB21B-109108-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 18100 Brookhurst St		Amount of Each Disbursement this Period 49.53
City Fountain Valley State CA Zip Code 92708	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Expenses Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Transaction ID: SB21B-109108-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 2702 Love Field Drive		Amount of Each Disbursement this Period 138.80
City Dallas State TX Zip Code 75235	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Montana Club Reserve		Transaction ID: SB21B-109109-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 4561 N Reserve St		Amount of Each Disbursement this Period 30.00
City Missoula State MT Zip Code 59808	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Courtyard Full Name (Last, First, Middle Initial) Mailing Address 4559 N Reserve St City Missoula State MT Zip Code 59808 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109109-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 115.07 [MEMO ITEM]
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B. Marriot Full Name (Last, First, Middle Initial) Mailing Address 1900 Connecticut Ave NW City Washington State DC Zip Code 20009 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109109-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 76.73 [MEMO ITEM]
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C. Daily Grill Full Name (Last, First, Middle Initial) Mailing Address 1200 18th Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109109-40000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 845.47 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Thai Tanic Full Name (Last, First, Middle Initial) Mailing Address 1326 14th St NW City Washington State DC Zip Code 20005 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109109-50000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 17.00 [MEMO ITEM]
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B. Mackeys Full Name (Last, First, Middle Initial) Mailing Address 1823 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109109-70000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 15.00 [MEMO ITEM]
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C. Hotel Helix Full Name (Last, First, Middle Initial) Mailing Address 1430 Rhode Island Ave NW City Washington State DC Zip Code 20005 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109109-80000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 1067.10 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. TGI Fridays		Transaction ID: SB21B-109109-90000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 4300 Glumack Drive MSP Airport		Amount of Each Disbursement this Period 13.00
City St. Paul State MN Zip Code 55111	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Delta Airlines		Transaction ID: SB21B-109109-100000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 636.80
City Atlanta State GA Zip Code 30320	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Sir Speedy		Transaction ID: SB21B-109111-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1300 Connecticut Avenue NW		Amount of Each Disbursement this Period 876.67
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Copying/Faxing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Smart City Networks Full Name (Last, First, Middle Initial) Mailing Address 3720 Howard Hughes Pkwy City Las Vegas State NV Zip Code 98169 Purpose of Disbursement Equipment Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109112-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 508.46 [MEMO ITEM]
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B. Nooshi Full Name (Last, First, Middle Initial) Mailing Address 1120 19th St NW City Washington State DC Zip Code 20036 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109113-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 6.20 [MEMO ITEM]
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C. DC Convention Center Full Name (Last, First, Middle Initial) Mailing Address 801 Mount Vernon Place, N.W City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109113-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 31.68 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Staples Full Name (Last, First, Middle Initial) Mailing Address 19th & L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109114-10000 Date of Disbursement MM / DD / YYYY 04 / 11 / 2007 Amount of Each Disbursement this Period 77.45 [MEMO ITEM]
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B. Hampton Inn Full Name (Last, First, Middle Initial) Mailing Address 550 Light St City Baltimore State MD Zip Code 21202 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109114-20000 Date of Disbursement MM / DD / YYYY 04 / 11 / 2007 Amount of Each Disbursement this Period 16.88 [MEMO ITEM]
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C. THE LOBSTER PLACE Full Name (Last, First, Middle Initial) Mailing Address 75 9th Ave City NEW YORK State NY Zip Code 10011 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109115-10000 Date of Disbursement MM / DD / YYYY 04 / 11 / 2007 Amount of Each Disbursement this Period 25.96 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. WASHINGTON FLYER TAXI		Transaction ID: SB21B-109120-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address DULLES INTERNATIONAL AIRPORT		Amount of Each Disbursement this Period 65.00
City STERLING State VA Zip Code 20165	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. OPEN CITY		Transaction ID: SB21B-109120-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 2331 Calvert St NW		Amount of Each Disbursement this Period 15.93
City WASHINGTON State DC Zip Code 20008	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. AMPCO PARKING		Transaction ID: SB21B-109120-40000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1101 California St		Amount of Each Disbursement this Period 63.00
City SAN FRANCISCO State CA Zip Code 94108	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. EXECUTIVE RIDE SEDAN		Transaction ID: SB21B-109120-50000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 7777 Leesburg Pike		Amount of Each Disbursement this Period 77.00
City FALLS CHURCH State VA Zip Code 22043	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PEET'S COFFEE		Transaction ID: SB21B-109120-60000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 3419 California St,		Amount of Each Disbursement this Period 8.01
City SAN FRANCISCO State CA Zip Code 94118	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Delta Airlines		Transaction ID: SB21B-109140-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 468.80
City Atlanta State GA Zip Code 30320	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Red Top Cab Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 100519 City Arlington State VA Zip Code 22210 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109140-20000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 136.00 [MEMO ITEM]
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B. National Airport Full Name (Last, First, Middle Initial) Mailing Address Aviation Circle City Washington State DC Zip Code 20001 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109140-30000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 9.24 [MEMO ITEM]
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C. Verizon Wireless Full Name (Last, First, Middle Initial) Mailing Address PO Box 17464 City Baltimore State MD Zip Code 21297-1464 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109211-10000 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period 40.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Washington Convention Center		Transaction ID: SB21B-109349-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 801 Mount Vernon Place NW		Amount of Each Disbursement this Period 72154.24
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Catering/Facilities Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hotel Rouge		Transaction ID: SB21B-109349-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1315 16th St NW		Amount of Each Disbursement this Period 422.51
City Washington State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Continental Airlines		Transaction ID: SB21B-109349-40000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1600 Smith Street		Amount of Each Disbursement this Period 640.30
City Houston State TX Zip Code 77002	[MEMO ITEM]	
Purpose of Disbursement Travel/Accommodation /Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. United Airlines Full Name (Last, First, Middle Initial) Mailing Address PO Box 66100 City Chicago State IL Zip Code 60666 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109349-50000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 1177.79 [MEMO ITEM]
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B. Doubletree Hotel Full Name (Last, First, Middle Initial) Mailing Address 1515 Rhode Island Ave NW City Washington State DC Zip Code 20005 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109349-60000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 4056.82 [MEMO ITEM]
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C. Omni Shoreham Hotel Full Name (Last, First, Middle Initial) Mailing Address 2500 Calvert Street NW City Washington State DC Zip Code 20008 Purpose of Disbursement Catering/Facilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109350-10000 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 6000.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Au Bon Pain Full Name (Last, First, Middle Initial) Mailing Address 1732 L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Catering/Facilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109350-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 10.53 [MEMO ITEM]
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B. Lexis Nexis Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 7247-7090 City Philadelphia State PA Zip Code 19170 Purpose of Disbursement Computer Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109351-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 11308.90 [MEMO ITEM]
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C. The Chronicle Full Name (Last, First, Middle Initial) Mailing Address 1255 23rd St NW # 700 City Washington State DC Zip Code 20037 Purpose of Disbursement Employee Recruitment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109352-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 421.00 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Survey Monkey.com		Transaction ID: SB21B-109353-10000 Date of Disbursement MM / DD / YYYY 04 / 11 / 2007
Mailing Address 125 N Hamilton		Amount of Each Disbursement this Period 19.95
City Madison State WI Zip Code 53703	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Google		Transaction ID: SB21B-109353-20000 Date of Disbursement MM / DD / YYYY 04 / 11 / 2007
Mailing Address 2400 Bayshore Parkway		Amount of Each Disbursement this Period 98.44
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Provantage Corp		Transaction ID: SB21B-109353-30000 Date of Disbursement MM / DD / YYYY 04 / 11 / 2007
Mailing Address 7249 Whipple Ave NW		Amount of Each Disbursement this Period 593.71
City North Canton State OH Zip Code 44720	Purpose of Disbursement Internet Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Borders Full Name (Last, First, Middle Initial) Mailing Address 18th & L Street NW City Washington State DC Zip Code 20036 Purpose of Disbursement Office Supplies Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109354-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 303.72 [MEMO ITEM]
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B. United Airlines Full Name (Last, First, Middle Initial) Mailing Address PO Box 66100 City Chicago State IL Zip Code 60666 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109355-10000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 488.80 [MEMO ITEM]
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C. Orbitz Full Name (Last, First, Middle Initial) Mailing Address 200 S Wacker Drive City Chicago State IL Zip Code 60606 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109355-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 6.99 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: SB21B-109355-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address PO Box 619612		Amount of Each Disbursement this Period 228.80
City DFW Airport	State TX Zip Code 75261	
Purpose of Disbursement Travel/Accommodation /Meals		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Expedia		Transaction ID: SB21B-109355-40000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 13810 SE Eastgate Way		Amount of Each Disbursement this Period 854.63
City Bellevue	State WA Zip Code 98005	
Purpose of Disbursement Travel/Accommodation /Meals		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Hotels.com		Transaction ID: SB21B-109355-50000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 8140 Walnut Hill Lane		Amount of Each Disbursement this Period 288.09
City Dallas	State TX Zip Code 75231	
Purpose of Disbursement Travel/Accommodation /Meals		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Orbitz Full Name (Last, First, Middle Initial) Mailing Address 200 S Wacker Drive City Chicago State IL Zip Code 60606 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109356-20000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 12.98 [MEMO ITEM]
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B. Delta Airlines Full Name (Last, First, Middle Initial) Mailing Address PO Box 20706 City Atlanta State GA Zip Code 30320 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109356-30000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 404.60 [MEMO ITEM]
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C. American Airlines Full Name (Last, First, Middle Initial) Mailing Address PO Box 619612 City DFW Airport State TX Zip Code 75261 Purpose of Disbursement Travel/Accommodation /Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-109356-40000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 277.30 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	337042.51

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228611 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address Judy Lane 114 Dennis Whitney Road		Amount of Each Disbursement this Period 50.00
City Oakham State MA Zip Code 01068	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228612 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Lily Eskelsen 1819 19th Street NW Apt. 2		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20009	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228613 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Arnold Wajenberg 240 Donald Drive		Amount of Each Disbursement this Period 100.00
City Goffstown State NH Zip Code 03045	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228614 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address Margaret Henney 4212 Queensbury Road		Amount of Each Disbursement this Period 100.00
City Hyattsville State MD Zip Code 20781	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228615 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Alma Klinetsky 500 S Ocean Blvd Ph		Amount of Each Disbursement this Period 15.00
City Boca Raton State FL Zip Code 33432	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228616 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Sarah Bruno 2000 Connecticut Ave., NW		Amount of Each Disbursement this Period 25.00
City Washington State DC Zip Code 20008	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228617 Date of Disbursement 04 / 23 / 2007
Mailing Address Carol Bradley 67 Richboro Road		Amount of Each Disbursement this Period 100.00
City Newton State PA Zip Code 18940	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228618 Date of Disbursement 04 / 10 / 2007
Mailing Address Lois Sturm 628 East 14th Street #6		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10009	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228619 Date of Disbursement 04 / 30 / 2007
Mailing Address Joan Brewster 242 Rivermead Rd		Amount of Each Disbursement this Period 100.00
City Peterborough State NH Zip Code 03458	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

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

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

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

FOR LINE NUMBER: (check only one)

<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)
EMILY's List

<p>A. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Katherine Kent 179 Sea Hammock Way</p> <p>City Ponte Vedra State FL Zip Code 32082</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228620 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Betty Sancier 2715 East Park Place</p> <p>City Milwaukee State WI Zip Code 53211</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228621 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Judith Rystar 4893 N. Goldwood Terrace</p> <p>City Beverly Hills State FL Zip Code 34465</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228622 Date of Disbursement 04 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228623 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Marjorie James 14416 Tanglewood Dr.		Amount of Each Disbursement this Period 100.00
City Farmers Branch State TX Zip Code 75234	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228624 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Louise Saltzman 760 Bronson Lane		Amount of Each Disbursement this Period 50.00
City Highland Park State IL Zip Code 60035	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228625 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Betty Lattie PO Box 2050		Amount of Each Disbursement this Period 100.00
City Waldport State OR Zip Code 97394	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

<p>A. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Nancy Hirzel PO Box 2402</p> <p>City Abbeville State LA Zip Code 70511</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 42228626</p> <p>Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Charlotte Olmsted PO Box 587</p> <p>City Woods Hole State MA Zip Code 02543</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 42228627</p> <p>Date of Disbursement 04 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 30.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Cecily Clark 75 Pork Hill</p> <p>City Ossipee State NH Zip Code 03864</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: 42228628</p> <p>Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

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

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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Elizabeth Bennett 263 Dos Brazos Street City: Los Alamos State: NM Zip Code: 87544 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228629 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Shirley Kirkland 17 E. 84th Street City: New York State: NY Zip Code: 10028 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228630 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Michael Simpson 10 Somerset Place City: Wilmington State: MA Zip Code: 01887 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228631 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228632 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Nancy Allison 137 E. 19th Street # 1		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10003	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228633 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Luann Abrahams 45 Walnut Street		Amount of Each Disbursement this Period 100.00
City Somerville State MA Zip Code 02143	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228634 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Merrilee Cate 4505 N. O'Connor Road		Amount of Each Disbursement this Period 50.00
City Irving State TX Zip Code 75062	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228635 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 7
Mailing Address Hal Reed 144 Orchard Hill Drive		Amount of Each Disbursement this Period 50.00
City South Windsor State CT Zip Code 06074	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228636 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Diana Bain 2657 Hemenway Road		Amount of Each Disbursement this Period 75.00
City Bridport State VT Zip Code 05734	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228637 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Charlotte Zietlow 213 S. Bryan		Amount of Each Disbursement this Period 100.00
City Bloomington State IN Zip Code 47408	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Edith Hersher 212 Beers Road City Easton State CT Zip Code 06612 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228638 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Alice Robinson 85 Grove Street #212 City Wellesley State MA Zip Code 02482 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228639 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Julia Field 180 Berkeley Place City Brooklyn State NY Zip Code 11217 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228640 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Elizabeth Boris 3516 Duff Drive City Falls Church State VA Zip Code 22041 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228641 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Eula West 26 Calle Cal City Santa Fe State NM Zip Code 87508 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228642 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address George Ranney 91 Prospect Street City Port Chester State NY Zip Code 10573 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228643 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address James Douglas 32 Lenox Road # C8 City Brooklyn State NY Zip Code 11226 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228644 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Polly Covell 7 Saint Andrews Way City Londonderry State NH Zip Code 03053 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228645 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Louise Cantrell-Kehoe 15971 Charter House Ln City Purcellville State VA Zip Code 20132 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228646 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Marsha Pedersen 5250 W. Avenue L6 City Quartz Hill State CA Zip Code 93536 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228647 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Marilyn Meardon 24 Rhode Island Avenue City Providence State RI Zip Code 02906 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228648 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Mary North 836 Welcome Way SE City Salem State OR Zip Code 97302 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228649 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

<p>A. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address: Jeanne Moore 12 Somer Drive</p> <p>City: Somerville State: NJ Zip Code: 08876</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228650 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address: Laura Yaeger 400 North Church Street</p> <p>City: Charlotte State: NC Zip Code: 28202</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228651 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address: Carol Copeland 1726 Grant Street</p> <p>City: Berkeley State: CA Zip Code: 94703</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228652 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>_____</p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

<p>A. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address: Gerhard Paskusz 850 Kuhlman Road</p> <p>City: Houston State: TX Zip Code: 77024</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228653</p> <p>Date of Disbursement: 04 / 20 / 2007</p> <p>Amount of Each Disbursement this Period: 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address: Patricia Mangini 4122 Amoroso St.</p> <p>City: San Diego State: CA Zip Code: 92111</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228654</p> <p>Date of Disbursement: 04 / 16 / 2007</p> <p>Amount of Each Disbursement this Period: 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address: Glenn Berkovitz 11929 Windward Avenue</p> <p>City: Los Angeles State: CA Zip Code: 90066</p> <p>Purpose of Disbursement: Candidate Contrib Earmarked</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228655</p> <p>Date of Disbursement: 04 / 20 / 2007</p> <p>Amount of Each Disbursement this Period: 20.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>_____</p>

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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Carl Langenhop 2200 Greentree N. Apt. 1107 City Clarksville State IN Zip Code 47129 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228656 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Carolyn Gusmer 122 Shadow Lake Drive City Waupaca State WI Zip Code 54981 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228657 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Eleanor Weinstock 525 South Flagler Drive City West Palm Beach State FL Zip Code 33401 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228658 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228659 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Elaine Tobin 2337 Veteran Avenue		Amount of Each Disbursement this Period 50.00
City Los Angeles State CA Zip Code 90064	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228660 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Martha Poling 1532 Sinclair Drive		Amount of Each Disbursement this Period 100.00
City McLean State VA Zip Code 22101	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228661 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Elizabeth MacKenzie 134 W 93rd Street, Apt. 4B		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10025	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228662 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address Linda Daube 50 Scarborough Road		Amount of Each Disbursement this Period 100.00
City Manchester State CT Zip Code 06040	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228663 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address Karen Hofmeister 2121 Kirby Drive		Amount of Each Disbursement this Period 50.00
City Houston State TX Zip Code 77019	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228664 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address Thomas Spofford 1116 Pearl Street		Amount of Each Disbursement this Period 50.00
City Columbus State IN Zip Code 47201	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228665 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Florence Boroson 50 Village Green Drive		Amount of Each Disbursement this Period 25.00
City Port Jefferson Sta	State NY	
Zip Code 11776		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228666 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Anne Vidaver 2416 Sewell Street		Amount of Each Disbursement this Period 50.00
City Lincoln	State NE	
Zip Code 68502		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228667 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Emelie Born 985 Memorial Dr. #603		Amount of Each Disbursement this Period 100.00
City Cambridge	State MA	
Zip Code 02138		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address: Jean Robinson 9840 S Pulaski Road # 321 City: Oak Lawn State: IL Zip Code: 60453 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228668 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address: Virginia Rankin 1222 NE 100th Street City: Seattle State: WA Zip Code: 98125 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228669 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address: Gloria Hern 7447 Sylmar Avenue City: Van Nuys State: CA Zip Code: 91405 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228670 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228671 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Kathleen McCormick 19928 Wissler Ranch Road		Amount of Each Disbursement this Period 50.00
City Black Forest State CO Zip Code 80908	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228672 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Alice Smith 531 Oneonta Street		Amount of Each Disbursement this Period 50.00
City Shreveport State LA Zip Code 71106	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228673 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Lucile Roberts 23 Cora Circle		Amount of Each Disbursement this Period 100.00
City Bella Vista State AR Zip Code 72714	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228674 Date of Disbursement MM / DD / YYYY 04 / 30 / 2007
Mailing Address Margaret Allen 3 Kendall Drive		Amount of Each Disbursement this Period 50.00
City Kennett Square State PA Zip Code 19348	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228675 Date of Disbursement MM / DD / YYYY 04 / 06 / 2007
Mailing Address Judy Dudley 349 Arthur Ave		Amount of Each Disbursement this Period 100.00
City Aptos State CA Zip Code 95003	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228676 Date of Disbursement MM / DD / YYYY 04 / 16 / 2007
Mailing Address Renate Wasserman 102 Tonset Road		Amount of Each Disbursement this Period 25.00
City Orleans State MA Zip Code 02653	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228677 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Dolores Stickler 2323 Pittston Ave		Amount of Each Disbursement this Period 100.00
City Scranton State PA Zip Code 18505	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228678 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Mary Louise Kimball 301 Linden PondsWay # 105		Amount of Each Disbursement this Period 100.00
City Hingham State MA Zip Code 02043	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228679 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Minnie Carson 12440 Rivercrest Drive		Amount of Each Disbursement this Period 250.00
City Little Rock State AR Zip Code 72212	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Virginia Hodgkinson 1907 Windmill Lane City Alexandria State VA Zip Code 22307 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228680 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Cheryl Wilfong Mailing Address Cheryl Wilfong 314 Partridge Road City E Dummerston State VT Zip Code 05346 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228681 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Sarah Hancock Mailing Address Sarah Hancock 31 Summit Rd City Belmont State MA Zip Code 02478 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228682 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

<p>A. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Miriam Karger 7 Rivermead Road</p> <p>City Peterborough State NH Zip Code 03458</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228683 Date of Disbursement 04 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Carol Kaplan 711 Adams Street</p> <p>City Hoboken State NJ Zip Code 07030</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228684 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Veronica Combs 2232 Gary Drive</p> <p>City New Albany State IN Zip Code 47150</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228685 Date of Disbursement 04 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228686 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Karen Cox 15214 Manzanita Diggins		Amount of Each Disbursement this Period 50.00
City Nevada City State CA Zip Code 95959	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228687 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address B. Prem 112 Lundy Lane		Amount of Each Disbursement this Period 40.00
City Lopez Island State WA Zip Code 98261	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228688 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Jane Einbender 10 MacDougal Alley		Amount of Each Disbursement this Period 15.00
City New York State NY Zip Code 10011	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

<p>A. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Linda Pelegrino 74936 Liveoak Street</p> <p>City Indian Wells State CA Zip Code 92210</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228689 Date of Disbursement 04 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Jeanne Thune 767 St. John S. Way</p> <p>City Hendersonville State NC Zip Code 28791</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228690 Date of Disbursement 04 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Gail Spane 1101 G Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228691 Date of Disbursement 04 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228692 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address Elaine Fishman 24511 N. Elm Road		Amount of Each Disbursement this Period 100.00
City Lake Forest State IL Zip Code 60045	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228693 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address M. E. Shank P.O. Box 450		Amount of Each Disbursement this Period 50.00
City York Harbor State ME Zip Code 03911	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228694 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Sandra Wallace 1330 El Vago Street		Amount of Each Disbursement this Period 100.00
City La Canada State CA Zip Code 91011	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228695 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Jacquelin Lindstrom 2900A Montezuma Avenue		Amount of Each Disbursement this Period 50.00
City Alhambra	State CA	
Zip Code 91803		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228696 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Patricia Reynolds 1180 Woods Cirlice NE		Amount of Each Disbursement this Period 10.00
City Atlanta	State GA	
Zip Code 30324		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228697 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Dianne Durrwachter 809 West 5th Street		Amount of Each Disbursement this Period 50.00
City Port Angeles	State WA	
Zip Code 98363		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Ann Hendrie 2 Warrens Point Road City Little Compton State RI Zip Code 02837 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228698 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Eva Herzfeld 8232 211th Street City Jamaica State NY Zip Code 11427 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228699 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Jacqueline McCarthy 9314 Sawyer Street City Los Angeles State CA Zip Code 90035 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228700 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228701 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Constance Moore 419 South Camac Street		Amount of Each Disbursement this Period 100.00
City Philadelphia	State PA	
Zip Code 19147		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228702 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address Virginia Kuhn 168 Sterling Point		Amount of Each Disbursement this Period 18.00
City Winston Salem	State NC	
Zip Code 27104		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228703 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Deborah Nosowsky 278 Amber Drive		Amount of Each Disbursement this Period 100.00
City San Francisco	State CA	
Zip Code 94131		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address: Barbara Malcolm 4775 S Harbor Dr Apt 101 City: Vero Beach State: FL Zip Code: 32967 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228704 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address: Elsie Sweeney 21775 Woodland Crest Drive City: Woodland Hls State: CA Zip Code: 91364 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228705 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address: Donna Pepos 4206 Forest Beach Drive, NW City: Gig Harbor State: WA Zip Code: 98335 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228706 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228707 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Cecelia Sears 11 Marseilles Court		Amount of Each Disbursement this Period 30.00
City Savannah State GA Zip Code 31419	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228708 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Jean Crichton 173 Summit Avenue		Amount of Each Disbursement this Period 75.00
City Summit State NJ Zip Code 07901	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228709 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address Catherine Medich 14 Stonicker Drive		Amount of Each Disbursement this Period 25.00
City Lawrenceville State NJ Zip Code 08648	Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228710 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address William Swartzchild 119 Erledon Road		Amount of Each Disbursement this Period 20.00
City Tenafly State NJ Zip Code 07670	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228711 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Ruth Mead 203 Thorn Hollow Drive		Amount of Each Disbursement this Period 100.00
City Apex State NC Zip Code 27523	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228712 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address Priscilla Meyer 4424 Athens Avenue		Amount of Each Disbursement this Period 250.00
City Waco State TX Zip Code 76710	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Ruth Swanton 41 Howard Avenue City New Haven State CT Zip Code 06519 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228713 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Charlene Blair 3626 Redbird City Waco State TX Zip Code 76705 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228714 Date of Disbursement 04 / 13 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Suzanne Winn 1414 Main St City Lynnfield State MA Zip Code 01940 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228715 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228716 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Susanne Demuth 46 Hillcrest Avenue		Amount of Each Disbursement this Period 100.00
City Port Jefferson	State NY	
Zip Code 11777		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228717 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Eugene Hildreth 2000 Cambridge Avenue		Amount of Each Disbursement this Period 250.00
City Wyomissing	State PA	
Zip Code 19610		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228718 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address Sue Anderson 9340 N. Shore Trail N		Amount of Each Disbursement this Period 50.00
City Forest Lake	State MN	
Zip Code 55025		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228719 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Phyllis Broyles P.O. Box 2216		Amount of Each Disbursement this Period 40.00
City McKinleyville	State CA	
Zip Code 95519		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228720 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address Joan Bacall 15 Eagle Drive		Amount of Each Disbursement this Period 100.00
City Newmarket	State NH	
Zip Code 03857		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228721 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Constance Bennett 200 Ankeny Street		Amount of Each Disbursement this Period 100.00
City San Francisco	State CA	
Zip Code 94134		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228722 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Margaret Cardoza 3656 Pine St		Amount of Each Disbursement this Period 25.00
City Castro Valley State CA Zip Code 94546	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228723 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address Mary Jourdan 2140 Santa Cruz Ave., # E202		Amount of Each Disbursement this Period 50.00
City Menlo Park State CA Zip Code 94025	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228724 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Evangeline Gonzales 8905 Allbill Way		Amount of Each Disbursement this Period 100.00
City San Diego State CA Zip Code 92119	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228725 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Joanna London 3940 Langley Court NW		Amount of Each Disbursement this Period 100.00
City Washington	State DC	
Zip Code 20016		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228726 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Richard Mironov 111 Aragon Blvd		Amount of Each Disbursement this Period 50.00
City San Mateo	State CA	
Zip Code 94402		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228727 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7
Mailing Address Sue Krenek 6 Main Dock		Amount of Each Disbursement this Period 25.00
City Sausalito	State CA	
Zip Code 94965		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228728 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Lois Phelps 47 Garrison Avenue		Amount of Each Disbursement this Period 100.00
City Battle Creek State MI Zip Code 49017	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228729 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Shirley Humphrey 6000 Lake Road, W #112		Amount of Each Disbursement this Period 50.00
City Ashtabula State OH Zip Code 44004	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228730 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Nobuko Ohashi 10654 Montrose Avenue		Amount of Each Disbursement this Period 50.00
City Bethesda State MD Zip Code 20814	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228731 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address Joanna Taylor 3701 27th Street N.		Amount of Each Disbursement this Period 50.00
City Arlington	State VA	
Zip Code 22207		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228732 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Thomas Kerenyi 1125 Park Avenue		Amount of Each Disbursement this Period 50.00
City New York	State NY	
Zip Code 10128		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228733 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Mary Cope 370 Riverside Drive, Apt. 15C		Amount of Each Disbursement this Period 50.00
City New York	State NY	
Zip Code 10025		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

<p>A. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Ethel Gould 757 Flume Court</p> <p>City Milpitas State CA Zip Code 95035</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228734 Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Mary Black 9484 SW 92nd Place Road</p> <p>City Ocala State FL Zip Code 34481</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228735 Date of Disbursement 04 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Elise Murray 75 Cherry Brook Drive</p> <p>City Princeton State NJ Zip Code 08540</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228736 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228737 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Judith Stetson 261 Quissett Avenue		Amount of Each Disbursement this Period 100.00
City Falmouth State MA Zip Code 02543	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228738 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Carol Matre 24700 Voorhees Drive		Amount of Each Disbursement this Period 25.00
City Los Altos Hills State CA Zip Code 94022	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228739 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Joyce Hagen 2913 Hollyridge Drive		Amount of Each Disbursement this Period 100.00
City Los Angeles State CA Zip Code 90068	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address: Suzanne Brown 19650 Timberline Drive City: Brookfield State: WI Zip Code: 53045 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228740 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address: Ann Stokes P.O. Box 84 City: West Chesterfield State: NH Zip Code: 03466 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228741 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address: Barbara Gingher 908 Holly Road City: Belmont State: CA Zip Code: 94002 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228742 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Eleanor Weiss-Zoub 6509 N. Kilbourn Avenue City Lincolnwood State IL Zip Code 60712 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228743 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Sally Hollaman 7 Riverwoods Drive Unit P219 City Exeter State NH Zip Code 03833 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228744 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Mailing Address Molly Oberbillig 1907 Parkwood Drive SE City Olympia State WA Zip Code 98501 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228745 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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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

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228746 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Jan Schochet 6511 Fallenbridge Road		Amount of Each Disbursement this Period 50.00
City Chapel Hill State NC Zip Code 27517	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228747 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Earl Withycombe PO Box 161821		Amount of Each Disbursement this Period 50.00
City Sacramento State CA Zip Code 95816	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228748 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Barbara Lindblom 1915 Diamond Court		Amount of Each Disbursement this Period 50.00
City Santa Rosa State CA Zip Code 95404	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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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

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(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)
EMILY's List

<p>A. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Evelyn Haynes 2303 Owens Avenue # 101</p> <p>City Fort Collins State CO Zip Code 80528</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228749 Date of Disbursement: 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Marion McConnell PO Box 832</p> <p>City Cotuit State MA Zip Code 02635</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228750 Date of Disbursement: 04 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 30.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Carol Shea-Porter Contributions</p> <p>Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions</p> <p>Mailing Address Phyllis Cohen 6619 Mercer Street</p> <p>City Houston State TX Zip Code 77005</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228751 Date of Disbursement: 04 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228752 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Clay Kirk 320 East 72nd St., Apt. 5C		Amount of Each Disbursement this Period 1000.00
City New York State NY Zip Code 10021	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228753 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Ethel Sutton 61 Brown Road		Amount of Each Disbursement this Period 100.00
City Scarsdale State NY Zip Code 10583	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228754 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Sandra Carr PO Box 223		Amount of Each Disbursement this Period 100.00
City Silver Lake State NH Zip Code 03875	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Pauline Andrews P.O. Box 5487 City Santa Monica State CA Zip Code 90409 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228755 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Sandra Blair 1815 Chestnut Street City Berkeley State CA Zip Code 94702 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228756 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Paula Roloff 19 Acacia Lane City Redwood City State CA Zip Code 94062 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228757 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228758 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Barbara Corwin 1230 Winding Ridge Terrace		Amount of Each Disbursement this Period 100.00
City Colorado Springs	State CO	
Zip Code 80919		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228759 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address Shirley Klass 226 S. Reese Street		Amount of Each Disbursement this Period 100.00
City Memphis	State TN	
Zip Code 38111		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228760 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Patricia Smith 234 Crescent Drive		Amount of Each Disbursement this Period 50.00
City Orinda	State CA	
Zip Code 94563		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228761 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Ann Marie Hendricks 29 Pond Street		Amount of Each Disbursement this Period 50.00
City Hopkinton State MA Zip Code 01748	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228762 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address Marta VanLoan 930 W. Arlington Street		Amount of Each Disbursement this Period 100.00
City Martinez State CA Zip Code 94553	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228763 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Joyce Freitag 2391 SW 13th way		Amount of Each Disbursement this Period 50.00
City Boynton Beach State FL Zip Code 33426	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address: Cornelia Lanou 90 Keene Street City: Providence State: RI Zip Code: 02906 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228764 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address: Patricia Withers 914 Main Unit 906 City: Houston State: TX Zip Code: 77002 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228765 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address: Christine Smith P.O. Box 3888 City: La Mesa State: CA Zip Code: 91944 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228766 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228767 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Jane Ross 1789 Woodfield Road		Amount of Each Disbursement this Period 50.00
City Mansfield State NJ Zip Code 08836	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228768 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Shirley Peters 3055 Autumn Court		Amount of Each Disbursement this Period 25.00
City Winter Park State FL Zip Code 32792	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter Contributions		Transaction ID: 42228769 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Claire Perey 4678 Gravelly Hills		Amount of Each Disbursement this Period 100.00
City Louisville State TN Zip Code 37777	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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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)
EMILY's List

A. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Camille Kurtz 2401 Calvert Street NW City Washington State DC Zip Code 20008 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228770 Date of Disbursement 04 / 25 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Janet Spence P.O. Box 465 City Dennis State MA Zip Code 02638 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228771 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Carol Shea-Porter Contributions Full Name (Last, First, Middle Initial) Carol Shea-Porter Contributions Mailing Address Margaret Gelin 105 Trowbridge Street, #4 City Cambridge State MA Zip Code 02138 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228772 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Carol Shea-Porter Contributions		Transaction ID: 42228773 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address David Cobey P.O. Box 31		Amount of Each Disbursement this Period 100.00
City Cushing State ME Zip Code 04563	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Shea-Porter Contributions		Transaction ID: 42228774 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address David Rice 54 Whiteoaks Circle		Amount of Each Disbursement this Period 100.00
City Bluffton State SC Zip Code 29910	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gabby Giffords Contributions		Transaction ID: 42228775 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Mary LeTellier P.O. Box 1488		Amount of Each Disbursement this Period 100.00
City Weaverlle State CA Zip Code 96093	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Linda Pelegrino 74936 Liveoak Street City Indian Wells State CA Zip Code 92210 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228776 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Marilyn Meardon 24 Rhode Island Avenue City Providence State RI Zip Code 02906 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228777 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Jeanne Thune 767 St. John S. Way City Hendersonville State NC Zip Code 28791 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228778 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Sue Anderson 9340 N. Shore Trail N City Forest Lake State MN Zip Code 55025 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228779 Date of Disbursement 04 / 18 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Glenn Berkovitz 11929 Windward Avenue City Los Angeles State CA Zip Code 90066 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228780 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Andrea Scheidt 40 East 80 Street City New York State NY Zip Code 10021 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228781 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 150.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Anne Vidaver 2416 Sewell Street City Lincoln State NE Zip Code 68502 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228782 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Patricia Slatt 25 Central Park W Apt. 71 City New York State NY Zip Code 10023 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228783 Date of Disbursement 04 / 18 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Elizabeth Shipley 805 Hagys Ford Road City Narberth State PA Zip Code 19072 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228784 Date of Disbursement 04 / 02 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol Matre 24700 Voorhees Drive City Los Altos Hills State CA Zip Code 94022 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228785 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Gerhard Paskusz 850 Kuhlman Road City Houston State TX Zip Code 77024 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228786 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Dennis Schwank 1034 Riviera Dr City Elgin State IL Zip Code 60124 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228787 Date of Disbursement 04 / 18 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Shirley Kirkland 17 E. 84th Street City New York State NY Zip Code 10028 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228788 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Joan Brewster 242 Rivermead Rd City Peterborough State NH Zip Code 03458 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228789 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Dianne Durrwachter 809 West 5th Street City Port Angeles State WA Zip Code 98363 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228790 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Gail Peery 7755 Dunhill Drive City Sylvania State OH Zip Code 43560 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228791 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Mary North 836 Welcome Way SE City Salem State OR Zip Code 97302 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228792 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Camille Kurtz 2401 Calvert Street NW City Washington State DC Zip Code 20008 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228793 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Louise Saltzman Mailing Address 760 Bronson Lane City Highland Park State IL Zip Code 60035 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228794 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Ethel Gould Mailing Address 757 Flume Court City Milpitas State CA Zip Code 95035 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228795 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Elise Murray Mailing Address 75 Cherry Brook Drive City Princeton State NJ Zip Code 08540 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228796 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<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)
EMILY's List

<p>A. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Lawrence Heaney 1611 Cleveland Street</p> <p>City Evanston State IL Zip Code 60202</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42228797</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Gloria Hern 7447 Sylmar Avenue</p> <p>City Van Nuys State CA Zip Code 91405</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42228798</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Patricia Stegman 245 Dean Street</p> <p>City Brooklyn State NY Zip Code 11217</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42228799</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol Copeland 1726 Grant Street City Berkeley State CA Zip Code 94703 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228800 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Patricia Smith 234 Crescent Drive City Orinda State CA Zip Code 94563 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228801 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address S. Michael Lunn 1601 Elm Street # 2000 City Dallas State TX Zip Code 75313 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228802 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gabby Giffords Contributions		Transaction ID: 42228803 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address William Swartzchild 119 Erledon Road		Amount of Each Disbursement this Period 20.00
City Tenafly State NJ Zip Code 07670	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gabby Giffords Contributions		Transaction ID: 42228804 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address George Ranney 91 Prospect Street		Amount of Each Disbursement this Period 20.00
City Port Chester State NY Zip Code 10573	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gabby Giffords Contributions		Transaction ID: 42228805 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address Phyllis Cohen 6619 Mercer Street		Amount of Each Disbursement this Period 50.00
City Houston State TX Zip Code 77005	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

<p>A. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial) Gabby Giffords Contributions</p> <p>Mailing Address Evelyn Haynes 2303 Owens Avenue # 101</p> <p>City Fort Collins State CO Zip Code 80528</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228806 Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
<p>B. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial) Gabby Giffords Contributions</p> <p>Mailing Address Eleanor Weiss-Zoub 6509 N. Kilbourn Avenue</p> <p>City Lincolnwood State IL Zip Code 60712</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228807 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 75.00</p> <p>[MEMO ITEM] MEMO</p>
<p>C. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial) Gabby Giffords Contributions</p> <p>Mailing Address Mary Ohlson 617 Woodrow Street NW</p> <p>City North Canton State OH Zip Code 44720</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228808 Date of Disbursement 04 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>

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

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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)
EMILY's List

<p>A. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial) Marta VanLoan</p> <p>Mailing Address 930 W. Arlington Street</p> <p>City State Zip Code Martinez CA 94553</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42228809</p> <p>Date of Disbursement 04 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial) Jean Crichton</p> <p>Mailing Address 173 Summit Avenue</p> <p>City State Zip Code Summit NJ 07901</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42228810</p> <p>Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 75.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial) Michael Simpson</p> <p>Mailing Address 10 Somerset Place</p> <p>City State Zip Code Wilmington MA 01887</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42228811</p> <p>Date of Disbursement 04 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Barbara Gingher 908 Holly Road City Belmont State CA Zip Code 94002 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228812 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Jane Einbender 10 MacDougal Alley City New York State NY Zip Code 10011 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228813 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Eva Herzfeld 8232 211th Street City Jamaica State NY Zip Code 11427 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228814 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Madeline Caton 5905D Clark Road, Apt. 174 City: Paradise State: CA Zip Code: 95969 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228815 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Barbara Krause 1509 N Garfield Street City: Arlington State: VA Zip Code: 22201 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228816 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Jeannie Jones 11 Overlook Drive City: Amherst State: MA Zip Code: 01002 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228817 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Elizabeth Bennett 263 Dos Brazos Street City Los Alamos State NM Zip Code 87544 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228818 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Patricia Reynolds 1180 Woods Cirlice NE City Atlanta State GA Zip Code 30324 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228819 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Marjorie James 14416 Tanglewood Dr. City Farmers Branch State TX Zip Code 75234 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228820 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Elsie Sweeney 21775 Woodland Crest Drive City: Woodland Hls State: CA Zip Code: 91364 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228821 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Betty Deshler 1190 W. Camino Sagasta City: Green Valley State: AZ Zip Code: 85614 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228822 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Marsha Pedersen 5250 W. Avenue L6 City: Quartz Hill State: CA Zip Code: 93536 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228823 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Eleanor Weinstock 525 South Flagler Drive City West Palm Beach State FL Zip Code 33401 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228824 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Julie Vargas 11 Old Dee Rd City Cambridge State MA Zip Code 02138 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228825 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Marilyn Dahl 515 Station Road City Amherst State MA Zip Code 01002 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228826 Date of Disbursement 04 / 18 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gabby Giffords Contributions		Transaction ID: 42228827 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Katherine Kent 179 Sea Hammock Way		Amount of Each Disbursement this Period 100.00
City State Zip Code Ponte Vedra FL 32082	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Gabby Giffords Contributions		Transaction ID: 42228828 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address Virginia Kuhn 168 Sterling Point		Amount of Each Disbursement this Period 18.00
City State Zip Code Winston Salem NC 27104	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Gabby Giffords Contributions		Transaction ID: 42228829 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 7
Mailing Address Hal Reed 144 Orchard Hill Drive		Amount of Each Disbursement this Period 50.00
City State Zip Code South Windsor CT 06074	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Jean Robinson 9840 S Pulaski Road # 321 City: Oak Lawn State: IL Zip Code: 60453 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228830 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Karen Hofmeister 2121 Kirby Drive City: Houston State: TX Zip Code: 77019 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228831 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Nancy Fogel 4881 Cobbler Court City: Pleasanton State: CA Zip Code: 94566 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228832 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) June Terrell 1178 Spencer Hill D		Transaction ID: 42228833 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address June Terrell 1178 Spencer Hill D	City State Zip Code Saint Peters MO 63376	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement Candidate Contrib Earmarked	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]
MEMO

B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Letha Sweet 1200 Mira Mar Avenue # 823		Transaction ID: 42228834 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Letha Sweet 1200 Mira Mar Avenue # 823	City State Zip Code Medford OR 97504	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Candidate Contrib Earmarked	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]
MEMO

C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Donna Nellist 4701 133rd Avenue SE		Transaction ID: 42228835 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Donna Nellist 4701 133rd Avenue SE	City State Zip Code Bellevue WA 98006	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Candidate Contrib Earmarked	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]
MEMO

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Edith Hersher 212 Beers Road City Easton State CT Zip Code 06612 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228836 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Yvonne Myles 2111 Welch St Apt B312 City Houston State TX Zip Code 77019 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228837 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Luann Abrahams 45 Walnut Street City Somerville State MA Zip Code 02143 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228838 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Betty Sancier 2715 East Park Place City Milwaukee State WI Zip Code 53211 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228839 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Patti Kile E3412 Bunker Road City Waupaca State WI Zip Code 54981 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228840 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Priscilla Meyer 4424 Athens Avenue City Waco State TX Zip Code 76710 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228841 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Marjorie Seward 435 Martin Terrace City: State College State: PA Zip Code: 16803 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228842 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period _____ 50.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: June Blanchard 2021 Van Hise Avenue City: Madison State: WI Zip Code: 53726 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228843 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period _____ 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Brenna Flaughter 1116 Clover Court City: Batavia State: IL Zip Code: 60510 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228844 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period _____ 25.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gabby Giffords Contributions		Transaction ID: 42228845 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address Judy Lane 114 Dennis Whitney Road		Amount of Each Disbursement this Period 50.00
City Oakham State MA Zip Code 01068	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Gabby Giffords Contributions		Transaction ID: 42228846 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address Mary Jourdan 2140 Santa Cruz Ave., # E202		Amount of Each Disbursement this Period 50.00
City Menlo Park State CA Zip Code 94025	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Gabby Giffords Contributions		Transaction ID: 42228847 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Nancy Allison 137 E. 19th Street # 1		Amount of Each Disbursement this Period 50.00
City New York State NY Zip Code 10003	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Linda Carlisle 5411 Rambling Road City Greensboro State NC Zip Code 27409 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228848 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Eugene Hildreth 2000 Cambridge Avenue City Wyomissing State PA Zip Code 19610 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228849 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Constance Moore 419 South Camac Street City Philadelphia State PA Zip Code 19147 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228850 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

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

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Detailed Summary Page

FOR LINE NUMBER:
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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gabby Giffords Contributions		Transaction ID: 42228851 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Elizabeth MacKenzie 134 W 93rd Street, Apt. 4B		Amount of Each Disbursement this Period 100.00
City New York State NY Zip Code 10025	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gabby Giffords Contributions		Transaction ID: 42228852 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Renate Wasserman 102 Tonset Road		Amount of Each Disbursement this Period 25.00
City Orleans State MA Zip Code 02653	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Gabby Giffords Contributions		Transaction ID: 42228853 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Ruth Swanton 41 Howard Avenue		Amount of Each Disbursement this Period 50.00
City New Haven State CT Zip Code 06519	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Constance Bennett 200 Ankeny Street City: San Francisco State: CA Zip Code: 94134 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228854 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: David Cobey P.O. Box 31 City: Cushing State: ME Zip Code: 04563 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228855 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Emelie Born 985 Memorial Dr. #603 City: Cambridge State: MA Zip Code: 02138 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228856 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gabby Giffords Contributions		Transaction ID: 42228857 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Carl Langenhop 2200 Greentree N. Apt. 1107		Amount of Each Disbursement this Period 35.00
City Clarksville State IN Zip Code 47129	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Gabby Giffords Contributions		Transaction ID: 42228858 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Karen Wilkins 2639 E Lake Shore Dr		Amount of Each Disbursement this Period 50.00
City Grayling State MI Zip Code 49738	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Gabby Giffords Contributions		Transaction ID: 42228859 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Sandra Wallace 1330 El Vago Street		Amount of Each Disbursement this Period 100.00
City La Canada State CA Zip Code 91011	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Laura Yaeger 400 North Church Street City: Charlotte State: NC Zip Code: 28202 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228860 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Sue Krenek 6 Main Dock City: Sausalito State: CA Zip Code: 94965 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228861 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Phyllis Broyles P.O. Box 2216 City: McKinleyville State: CA Zip Code: 95519 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228862 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 40.00 [MEMO ITEM] MEMO
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joanna London 3940 Langley Court NW City: Washington State: DC Zip Code: 20016 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228863 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Veronica Combs 2232 Gary Drive City: New Albany State: IN Zip Code: 47150 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228864 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Janet Spence P.O. Box 465 City: Dennis State: MA Zip Code: 02638 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228865 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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<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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Janet Hofmann 3889 Harvest Drive City Redwood City State CA Zip Code 94061 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228866 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Sheila Oconnor 2 Englewood Dr Apt City Harwich State MA Zip Code 02645 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228867 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Joanna Taylor 3701 27th Street N. City Arlington State VA Zip Code 22207 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228868 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Cope 370 Riverside Drive, Apt. 15C City: New York State: NY Zip Code: 10025 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228869 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Kathleen McCormick 19928 Wissler Ranch Road City: Black Forest State: CO Zip Code: 80908 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228870 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Margaret Cardoza 3656 Pine St City: Castro Valley State: CA Zip Code: 94546 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228871 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Gayna Radtke 1273 Hearst Avenue City Berkeley State CA Zip Code 94702 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228872 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Catherine Smith 3565 Rosalinda Dr City Reno State NV Zip Code 89503 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228873 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Ruth Freymann 355 Blackstone Blvd City Providence State RI Zip Code 02906 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228874 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Suzanne Brown 19650 Timberline Drive City: Brookfield State: WI Zip Code: 53045 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228875 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Elizabeth Boris 3516 Duff Drive City: Falls Church State: VA Zip Code: 22041 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228876 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Ethel Plagenz 1957 W. Island Circle City: Safford State: AZ Zip Code: 85546 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228877 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Beth Triplett 106 Bellechasse Drive City Chesterfield State MO Zip Code 63017 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228878 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Susan Miller 12718 Sawdust Drive City Glen Allen State VA Zip Code 23059 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228879 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Kathryn Kuehl 3400 Sullivan Court City Modesto State CA Zip Code 95356 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228880 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Joyce Hagen 2913 Hollyridge Drive City Los Angeles State CA Zip Code 90068 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228881 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Mary Zeis 335 Whispering Pines City Loveland State OH Zip Code 45140 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228882 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Arlene Grindstad 3242 W. Wethersfield Road City Phoenix State AZ Zip Code 85029 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228883 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

<p>A. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42228884</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="07"/></p>
<p>Mailing Address Virginia Hodgkinson 1907 Windmill Lane</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>City Alexandria State VA Zip Code 22307</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	

<p>B. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42228885</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="07"/></p>
<p>Mailing Address Clay Kirk 320 East 72nd St., Apt. 5C</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>City New York State NY Zip Code 10021</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	

<p>C. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42228886</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="07"/></p>
<p>Mailing Address B. Prem 112 Lundy Lane</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="40.00"/></p>
<p>City Lopez Island State WA Zip Code 98261</p>	<p>[MEMO ITEM] MEMO</p>	
<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p>		<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	

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

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gabby Giffords Contributions		Transaction ID: 42228887 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Virginia Rankin 1222 NE 100th Street		Amount of Each Disbursement this Period 100.00
City Seattle State WA Zip Code 98125	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Gabby Giffords Contributions		Transaction ID: 42228888 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Molly Oberbillig 1907 Parkwood Drive SE		Amount of Each Disbursement this Period 25.00
City Olympia State WA Zip Code 98501	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Gabby Giffords Contributions		Transaction ID: 42228889 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Cheryl Wilfong 314 Partridge Road		Amount of Each Disbursement this Period 100.00
City E Dummerston State VT Zip Code 05346	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

<p>A. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42228890</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="07"/></p>
<p>Mailing Address Barbara Corwin 1230 Winding Ridge Terrace</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>City Colorado Springs State CO Zip Code 80919</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>

<p>B. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42228891</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="07"/></p>
<p>Mailing Address Shirley Peters 3055 Autumn Court</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p>
<p>City Winter Park State FL Zip Code 32792</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>

<p>C. Gabby Giffords Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42228892</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="07"/></p>
<p>Mailing Address Elaine Tobin 2337 Veteran Avenue</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>City Los Angeles State CA Zip Code 90064</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Jo Dale 704 N. Ponca Drive City Independence State MO Zip Code 64056 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228893 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Betty Lattie PO Box 2050 City Waldport State OR Zip Code 97394 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228894 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Earl Withycombe PO Box 161821 City Sacramento State CA Zip Code 95816 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228895 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mignon Adams 1922 Pemberton Street City: Philadelphia State: PA Zip Code: 19146 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228896 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Sally Maier 2519 8th Street City: Livermore State: CA Zip Code: 94550 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228897 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Elizabeth Haan P.O. Box 999 City: Waldron State: WA Zip Code: 98297 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228898 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Lily Eskelsen 1819 19th Street NW Apt. 2 City: Washington State: DC Zip Code: 20009 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228899 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Pauline Andrews P.O. Box 5487 City: Santa Monica State: CA Zip Code: 90409 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228900 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) William Terrell 7447 Oxford Court City: Wichita State: KS Zip Code: 67226 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228901 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Margaret Hefner 715 N Price Road City: Olivette State: MO Zip Code: 63132 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228902 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Valerie Rowe 300 Central Park West 29G City: New York State: NY Zip Code: 10024 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228903 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address: Catherine Halcomb P.O. Box 409 City: Beulah State: CO Zip Code: 81023 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228904 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Dolores Stickler 2323 Pittston Ave City Scranton State PA Zip Code 18505 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228905 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Gabby Giffords Contributions Full Name (Last, First, Middle Initial) Mailing Address Caroline Peters 5553 Ashby Ct City Waterford State MI Zip Code 48327 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228906 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address Julie Monson P.O. Box 1029 City Point Reyes Sta. State CA Zip Code 94956 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228907 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Stephanie Eller 2706 N. Pollard St. City: Arlington State: VA Zip Code: 22207 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228908 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Katherine Kent 179 Sea Hammock Way City: Ponte Vedra State: FL Zip Code: 32082 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228909 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: G. Willoughby 1211 Creek Forest Lane City: Austell State: GA Zip Code: 30106 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228910 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Karen Wilkins 2639 E Lake Shore Dr City Grayling State MI Zip Code 49738 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228911 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Leslie Christensen 9728 Swift Creek Court City Fairfax Station State VA Zip Code 22039 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228912 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Nola Wallace 947 Stuhr Drive City San Gabriel State CA Zip Code 91775 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228913 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address Sue Anderson 9340 N. Shore Trail N City Forest Lake State MN Zip Code 55025 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228914 Date of Disbursement 04 / 18 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address Marta VanLoan 930 W. Arlington Street City Martinez State CA Zip Code 94553 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228915 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address Ruth Dickler 120 East 81st Street, Apt. 12C City New York State NY Zip Code 10028 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228916 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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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

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(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Hillary Clinton Contributions		Transaction ID: 42228917 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Judith Stetson 261 Quissett Avenue		Amount of Each Disbursement this Period 50.00
City Falmouth State MA Zip Code 02543	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Hillary Clinton Contributions		Transaction ID: 42228918 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Patricia Withers 914 Main Unit 906		Amount of Each Disbursement this Period 100.00
City Houston State TX Zip Code 77002	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Hillary Clinton Contributions		Transaction ID: 42228919 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address Eula West 26 Calle Cal		Amount of Each Disbursement this Period 100.00
City Santa Fe State NM Zip Code 87508	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Jeanne Moore 12 Somer Drive City: Somerville State: NJ Zip Code: 08876 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228920 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Sally Maier 2519 8th Street City: Livermore State: CA Zip Code: 94550 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228921 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Barbara Gingher 908 Holly Road City: Belmont State: CA Zip Code: 94002 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228922 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Carol Matre 24700 Voorhees Drive City Los Altos Hills State CA Zip Code 94022 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228923 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Sharon Lewis 8842 San Badger Way City Elk Grove State CA Zip Code 95624 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228924 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Elaine Fishman 24511 N. Elm Road City Lake Forest State IL Zip Code 60045 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228925 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address David Lange 12 Pinecrest Court City Greenbelt State MD Zip Code 20770 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228926 Date of Disbursement 04 / 29 / 2007 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Michael Simpson 10 Somerset Place City Wilmington State MA Zip Code 01887 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228927 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Dianne Durrwachter 809 West 5th Street City Port Angeles State WA Zip Code 98363 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228928 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Jody Carlson 17 Appleby Road City Wellesley State MA Zip Code 02482 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228929 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Ann Cutler 8 Fetlock Lane City Blue Bell State PA Zip Code 19422 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228930 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Gail Peery 7755 Dunhill Drive City Sylvania State OH Zip Code 43560 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228931 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Camille Kurtz 2401 Calvert Street NW City Washington State DC Zip Code 20008 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228932 Date of Disbursement 04 / 25 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Jeanne Thune 767 St. John S. Way City Hendersonville State NC Zip Code 28791 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228933 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Elaine Kant 7600 Valley Dale Drive City Austin State TX Zip Code 78731 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228934 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Hillary Clinton Contributions		Transaction ID: 42228935 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Lisa Hellerstein 86 Stuyvesant Avenue		Amount of Each Disbursement this Period 100.00
City Larchmont State NY Zip Code 10538	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hillary Clinton Contributions		Transaction ID: 42228936 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Jeannette Wheeler 7500 N. Calle Sin Envidia		Amount of Each Disbursement this Period 50.00
City Tucson State AZ Zip Code 85718	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hillary Clinton Contributions		Transaction ID: 42228937 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Barbara Ryder 166 Grove Avenue		Amount of Each Disbursement this Period 100.00
City Metuchen State NJ Zip Code 08840	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228938 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Marilyn Meardon 24 Rhode Island Avenue		Amount of Each Disbursement this Period 25.00
City Providence State RI Zip Code 02906	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228939 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Joyce Freitag 2391 SW 13th way		Amount of Each Disbursement this Period 100.00
City Boynton Beach State FL Zip Code 33426	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228940 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address Christine Henry 729 Mill St.		Amount of Each Disbursement this Period 500.00
City Moorestown State NJ Zip Code 08057	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228941 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address: Teresa Meeks 9 North Street		Amount of Each Disbursement this Period 100.00
City: Brookeville State: MD Zip Code: 20833	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228942 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address: Jeraldine Trabant 726 Loveville Rd Ap		Amount of Each Disbursement this Period 100.00
City: Hockessin State: DE Zip Code: 19707	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228943 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 7
Mailing Address: Victoria Perkins 11000 Huntover Drive		Amount of Each Disbursement this Period 250.00
City: Rockville State: MD Zip Code: 20852	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Hillary Clinton Contributions		Transaction ID: 42228944 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Jo Dale 704 N. Ponca Drive		Amount of Each Disbursement this Period 50.00
City Independence State MO Zip Code 64056	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Hillary Clinton Contributions		Transaction ID: 42228945 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Joan Perez 704 N. 10th Street		Amount of Each Disbursement this Period 25.00
City Humboldt State KS Zip Code 66748	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Hillary Clinton Contributions		Transaction ID: 42228946 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Jane Donawerth 7007 Allison Street		Amount of Each Disbursement this Period 25.00
City Hyattsville State MD Zip Code 20784	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

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(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)
EMILY's List

<p>A. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42228947 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	0	7													
<p>Mailing Address Louise Cantrell-Kehoe 15971 Charter House Ln</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City Purcellville State VA Zip Code 20132</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>B. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42228948 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	8		2	0	0	7													
<p>Mailing Address Dorothy Nye 67 Walnut Bottom Road</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p>	100.00																			
100.00																						
<p>City Shippenburg State PA Zip Code 17257</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>C. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42228949 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	4		2	0	0	7													
<p>Mailing Address Carole Johnson 669 Garfield Avenue</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> </p>	50.00																			
50.00																						
<p>City Lake Bluff State IL Zip Code 60044</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td></td> </tr> </table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228950 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address: Ione Wiedersich 157 Lakewood Ct		Amount of Each Disbursement this Period 100.00
City: Burlington State: NC Zip Code: 27215	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228951 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7
Mailing Address: Sue Krenek 6 Main Dock		Amount of Each Disbursement this Period 75.00
City: Sausalito State: CA Zip Code: 94965	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228952 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address: Mary Ellis 225 Clinton Street		Amount of Each Disbursement this Period 250.00
City: Saratoga Springs State: NY Zip Code: 12866	[MEMO ITEM] MEMO	
Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Category/Type: _____		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Nancy England 593 Knox Road 1300 E. City: Maquon State: IL Zip Code: 61458 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228953 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Laura Iraci 1021 Golf Court City: Mountain View State: CA Zip Code: 94040 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228954 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Veronica Combs 2232 Gary Drive City: New Albany State: IN Zip Code: 47150 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228955 Date of Disbursement 04 / 01 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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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)
EMILY's List

<p>A. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42228956 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	0	7													
<p>Mailing Address Patricia Reynolds 1180 Woods Circe NE</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>10.00</td> </tr> </table> </p>	10.00																			
10.00																						
<p>City Atlanta State GA Zip Code 30324</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>B. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42228957 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	0	7													
<p>Mailing Address Kathy Hess 5616 Freeman Drive</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> </p>	25.00																			
25.00																						
<p>City Rocklin State CA Zip Code 95677</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>C. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42228958 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	1		2	0	0	7													
<p>Mailing Address Marilyn McConnell 2210 Calhoun Street</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> </p>	50.00																			
50.00																						
<p>City New Orleans State LA Zip Code 70118</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
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<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td></td> </tr> </table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Joan McCauley 542 Santa Ana Avenue City Newport Beach State CA Zip Code 92663 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228959 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 300.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Elizabeth Bennett 263 Dos Brazos Street City Los Alamos State NM Zip Code 87544 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228960 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Linda Carlisle 5411 Rambling Road City Greensboro State NC Zip Code 27409 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228961 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

<p>A. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Carol Leonard 540 Liberty Street</p> <p>City San Francisco State CA Zip Code 94114</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228962</p> <p>Date of Disbursement 04 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Joyce Newcomb 5355 Pooks Hill Road</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228963</p> <p>Date of Disbursement 04 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Alice Smith 531 Oneonta Street</p> <p>City Shreveport State LA Zip Code 71106</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228964</p> <p>Date of Disbursement 04 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] MEMO</p>
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SUBTOTAL of Disbursements This Page (optional) ► 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Ellen More 521 Salisbury St City Worcester State MA Zip Code 01609 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228965 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Marilyn Dahl 515 Station Road City Amherst State MA Zip Code 01002 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228966 Date of Disbursement 04 / 18 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Vesta Downer 509 Hillwood Avenue City Falls Church State VA Zip Code 22042 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228967 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address June Terrell 1178 Spencer Hill D City Saint Peters State MO Zip Code 63376 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228968 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Elizabeth VanHorn 1415 Granville Road City Newark State OH Zip Code 43055 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228969 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Lois Phelps 47 Garrison Avenue City Battle Creek State MI Zip Code 49017 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228970 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Cecelia Sears 11 Marseilles Court City Savannah State GA Zip Code 31419 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228971 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 30.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Lois Scott 46 Walnut Circle City Aurora State IL Zip Code 60506 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228972 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Yvonne Myles 2111 Welch St Apt B312 City Houston State TX Zip Code 77019 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228973 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s)
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Detailed Summary Page

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(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)
EMILY's List

<p>A. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Patti Kile E3412 Bunker Road</p> <p>City Waupaca State WI Zip Code 54981</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228974 Date of Disbursement 04 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Dolores Thompson Indian Palms Country Club</p> <p>City Indio State CA Zip Code 92201</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228975 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Nellwyn Doornbos 2093 Mataro Way</p> <p>City San Jose State CA Zip Code 95135</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228976 Date of Disbursement 04 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Mary Tobin 1412 Oak Avenue City: Evanston State: IL Zip Code: 60201 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228977 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Marjorie Seward 435 Martin Terrace City: State College State: PA Zip Code: 16803 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228978 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Margaret Henney 4212 Queensbury Road City: Hyattsville State: MD Zip Code: 20781 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228979 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

<p>A. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Charlene Marsh 9862 Theresa Avenue</p> <p>City Anaheim State CA Zip Code 92804</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228980 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Barbara Alexander 4200 Bright Rd</p> <p>City Dublin State OH Zip Code 43016</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228981 Date of Disbursement 04 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Susan Rothenberg 420 12 St H3L</p> <p>City Brooklyn State NY Zip Code 11215</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228982 Date of Disbursement 04 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Phyllis Broyles P.O. Box 2216 City McKinleyville State CA Zip Code 95519 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228983 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 40.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Maud Arend 411 Colborne Street City St. Paul State MN Zip Code 55102 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228984 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Barbara Dewey 200 Lorraine St City Carrboro State NC Zip Code 27510 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228985 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

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(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)
EMILY's List

<p>A. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Ruth Swanton 41 Howard Avenue</p> <p>City New Haven State CT Zip Code 06519</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228986 Date of Disbursement 04 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Constance Bennett 200 Ankeny Street</p> <p>City San Francisco State CA Zip Code 94134</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228987 Date of Disbursement 04 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p> <p>Mailing Address Carol Spaziani 409 Crestview Avenue</p> <p>City Iowa City State IA Zip Code 52245</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42228988 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Nobuko Ohashi 10654 Montrose Avenue City: Bethesda State: MD Zip Code: 20814 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228989 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Cheryl Kraywinkel 401 Westacre Road Apt. 32 City: West Sacramento State: CA Zip Code: 95691 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228990 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Anne Ramsay 20 South 19th St City: Fernandina Beach State: FL Zip Code: 32034 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228991 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Caroline Peters 5553 Ashby Ct City Waterford State MI Zip Code 48327 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228992 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Andrea Scheidt 40 East 80 Street City New York State NY Zip Code 10021 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228993 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 150.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Antoinette Whitmore 4 Wentworth Road City Melrose State MA Zip Code 02176 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42228994 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Ann Hendrie 2 Warrens Point Road City Little Compton State RI Zip Code 02837 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228995 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address William Thibodeaux 113 Oakdale Loop City Houma State LA Zip Code 70360 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228996 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Janet Hofmann 3889 Harvest Drive City Redwood City State CA Zip Code 94061 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42228997 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228998 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Kathleen McCormick 19928 Wissler Ranch Road		Amount of Each Disbursement this Period 50.00
City Black Forest State CO Zip Code 80908	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42228999 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Kathryn Moore 1307 Peachwood Lane		Amount of Each Disbursement this Period 10.00
City Bowie State MD Zip Code 20716	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42229000 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Lois Carpenter 12758 County Road 501		Amount of Each Disbursement this Period 100.00
City Bayfield State CO Zip Code 81122	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Margaret Cardoza 3656 Pine St City Castro Valley State CA Zip Code 94546 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229001 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Kathleen Costa 1122 El Centro Avenue City Oakland State CA Zip Code 94602 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229002 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Ethel Plagenz 1957 W. Island Circle City Safford State AZ Zip Code 85546 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229003 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Susan Miller 12718 Sawdust Drive City Glen Allen State VA Zip Code 23059 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229004 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Gail Stephenson 112 Orchard Crest Circle City Clinton State TN Zip Code 37716 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229005 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address Mary Zeis 335 Whispering Pines City Loveland State OH Zip Code 45140 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229006 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Hillary Clinton Contributions		Transaction ID: 42229007 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Mary McNeive 333 W Meyer Boulevard		Amount of Each Disbursement this Period 100.00
City Kansas City	State MO	
Zip Code 64113		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Hillary Clinton Contributions		Transaction ID: 42229008 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Minnie Carson 12440 Rivercrest Drive		Amount of Each Disbursement this Period 250.00
City Little Rock	State AR	
Zip Code 72212		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Hillary Clinton Contributions		Transaction ID: 42229009 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Martha Jesnak 3213 Buttercup Ct		Amount of Each Disbursement this Period 25.00
City Adamstown	State MD	
Zip Code 21710		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

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

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(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Hillary Clinton Contributions		Transaction ID: 42229010 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address B. Prem 112 Lundy Lane		Amount of Each Disbursement this Period 100.00
City Lopez Island State WA Zip Code 98261	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hillary Clinton Contributions		Transaction ID: 42229011 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address June Miller 10550 Wilshire Blvd Apt 704		Amount of Each Disbursement this Period 100.00
City Los Angeles State CA Zip Code 90024	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hillary Clinton Contributions		Transaction ID: 42229012 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Cheryl Wilfong 314 Partridge Road		Amount of Each Disbursement this Period 100.00
City E Dummerston State VT Zip Code 05346	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Amelia Boss 309 Westmont Avenue City: Haddonfield State: NJ Zip Code: 08033 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229013 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Martha Whitehead PO Box 688 City: Longview State: TX Zip Code: 75606 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229014 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address: Shirley Peters 3055 Autumn Court City: Winter Park State: FL Zip Code: 32792 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229015 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Kristin Menon PO Box 6116 City: Boulder State: CO Zip Code: 80306 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229016 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Barbara Selsor PO Box 270257 City: Susanville State: CA Zip Code: 96127 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229017 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Mailing Address: Nancy Hirzel PO Box 2402 City: Abbeville State: LA Zip Code: 70511 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229018 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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<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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42229019 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Mary Louise Kimball 301 Linden PondsWay # 105		Amount of Each Disbursement this Period 100.00
City Hingham State MA Zip Code 02043	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42229020 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Valerie Rowe 300 Central Park West 29G		Amount of Each Disbursement this Period 250.00
City New York State NY Zip Code 10024	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42229021 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address Marilyn Fitzgerald 1838 Fonthill Ct		Amount of Each Disbursement this Period 100.00
City Mc Lean State VA Zip Code 22102	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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<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)
EMILY's List

<p>A. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42229022 Date of Disbursement 04 / 30 / 2007</p>
<p>Mailing Address Elizabeth Haan P.O. Box 999</p>		<p>Amount of Each Disbursement this Period 50.00</p>
<p>City Waldron State WA Zip Code 98297</p>		
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42229023 Date of Disbursement 04 / 23 / 2007</p>
<p>Mailing Address Nona Cannon 183 Third Avenue # 304</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Chula Vista State CA Zip Code 91910</p>		
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Hillary Clinton Contributions</p> <p>Full Name (Last, First, Middle Initial) Hillary Clinton Contributions</p>		<p>Transaction ID: 42229024 Date of Disbursement 04 / 30 / 2007</p>
<p>Mailing Address Pauline Andrews P.O. Box 5487</p>		<p>Amount of Each Disbursement this Period 100.00</p>
<p>City Santa Monica State CA Zip Code 90409</p>		
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Hillary Clinton Contributions		Transaction ID: 42229025 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address Nadean Bishop 10130 Manning Avenue N		Amount of Each Disbursement this Period 50.00
City Stillwater State MN Zip Code 55082	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Hillary Clinton Contributions		Transaction ID: 42229026 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Pat Reynolds 2910 W Yakima Avenue		Amount of Each Disbursement this Period 50.00
City Yakima State WA Zip Code 98902	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Hillary Clinton Contributions		Transaction ID: 42229027 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address M. E. Shank P.O. Box 450		Amount of Each Disbursement this Period 50.00
City York Harbor State ME Zip Code 03911	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42229028 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address Christine Smith P.O. Box 3888		Amount of Each Disbursement this Period 250.00
City La Mesa	State CA	
Zip Code 91944		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42229029 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Carolyn Gusmer 122 Shadow Lake Drive		Amount of Each Disbursement this Period 250.00
City Waupaca	State WI	
Zip Code 54981		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions		Transaction ID: 42229030 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Marechal Kaytor 1055 Harkness Street		Amount of Each Disbursement this Period 100.00
City Manhattan Beach	State CA	
Zip Code 90266		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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**SCHEDULE B (FEC Form 3X)
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<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)
EMILY's List

A. Hillary Clinton Contributions Full Name (Last, First, Middle Initial) Hillary Clinton Contributions Mailing Address William Terrell 7447 Oxford Court City Wichita State KS Zip Code 67226 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229031 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Kirsten Gillibrand Contributions Mailing Address Kay MacLaury 28 Garnsey Road City Rexford State NY Zip Code 12148 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229032 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Kirsten Gillibrand Contributions Mailing Address Deborah Nosowsky 278 Amber Drive City San Francisco State CA Zip Code 94131 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229033 Date of Disbursement 04 / 16 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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<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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Julia Field 180 Berkeley Place City Brooklyn State NY Zip Code 11217 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229034 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Betty Sancier 2715 East Park Place City Milwaukee State WI Zip Code 53211 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229035 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address M. Gay Conklin P O Box 3795 City Honolulu State HI Zip Code 96812 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229036 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

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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)
EMILY's List

<p>A. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial) Kirsten Gillibrand Contributions</p> <p>Mailing Address Dolores Thompson Indian Palms Country Club</p> <p>City Indio State CA Zip Code 92201</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42229037 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>B. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial) Kirsten Gillibrand Contributions</p> <p>Mailing Address Katherine Kent 179 Sea Hammock Way</p> <p>City Ponte Vedra State FL Zip Code 32082</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42229038 Date of Disbursement 04 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>C. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial) Kirsten Gillibrand Contributions</p> <p>Mailing Address Diana Bain 2657 Hemenway Road</p> <p>City Bridport State VT Zip Code 05734</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 42229039 Date of Disbursement 04 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 75.00</p> <p>[MEMO ITEM] MEMO</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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)
EMILY's List

<p>A. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Thomas Spofford 1116 Pearl Street</p> <p>City Columbus State IN Zip Code 47201</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229040</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>B. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Jean Robinson 9840 S Pulaski Road # 321</p> <p>City Oak Lawn State IL Zip Code 60453</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229041</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

<p>C. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Joann Peters 9832 Lake Haven Circle</p> <p>City Fort Worth State TX Zip Code 76108</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229042</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/ Type</p>

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

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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Black 9484 SW 92nd Place Road City: Ocala State: FL Zip Code: 34481 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229043 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period _____ 50.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Elizabeth Bennett 263 Dos Brazos Street City: Los Alamos State: NM Zip Code: 87544 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229044 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period _____ 25.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Nola Wallace 947 Stuhr Drive City: San Gabriel State: CA Zip Code: 91775 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229045 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period _____ 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	_____ 0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Sue Anderson 9340 N. Shore Trail N City Forest Lake State MN Zip Code 55025 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229046 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Jane Ross 1789 Woodfield Road City Mansfield State NJ Zip Code 08836 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229047 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Marta VanLoan 930 W. Arlington Street City Martinez State CA Zip Code 94553 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229048 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: George Ranney 91 Prospect Street City: Port Chester State: NY Zip Code: 10573 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229049 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Barbara Gingher 908 Holly Road City: Belmont State: CA Zip Code: 94002 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229050 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Carol Copeland 1726 Grant Street City: Berkeley State: CA Zip Code: 94703 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229051 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kirsten Gillibrand Contributions		Transaction ID: 42229052 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 7
Mailing Address Terence Vinson 8907 Concho St.		Amount of Each Disbursement this Period 100.00
City Houston State TX Zip Code 77036	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kirsten Gillibrand Contributions		Transaction ID: 42229053 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Lisa Hellerstein 86 Stuyvesant Avenue		Amount of Each Disbursement this Period 100.00
City Larchmont State NY Zip Code 10538	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kirsten Gillibrand Contributions		Transaction ID: 42229054 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address Gerhard Paskusz 850 Kuhlman Road		Amount of Each Disbursement this Period 100.00
City Houston State TX Zip Code 77024	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Patricia Stegman 245 Dean Street City: Brooklyn State: NY Zip Code: 11217 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229055 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Shirley Kirkland 17 E. 84th Street City: New York State: NY Zip Code: 10028 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229056 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Eva Herzfeld 8232 211th Street City: Jamaica State: NY Zip Code: 11427 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229057 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

PAGE 476 / 1028

<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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Joan Brewster 242 Rivermead Rd City: Peterborough State: NH Zip Code: 03458 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229058 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Dianne Durrwachter 809 West 5th Street City: Port Angeles State: WA Zip Code: 98363 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229059 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Glenn Berkovitz 11929 Windward Avenue City: Los Angeles State: CA Zip Code: 90066 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229060 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Elizabeth Shipley 805 Hagys Ford Road City Narberth State PA Zip Code 19072 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229061 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Anne Vidaver 2416 Sewell Street City Lincoln State NE Zip Code 68502 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229062 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Ruth Goldberg 7673 Cedarwood Circle City Boca Raton State FL Zip Code 33434 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229063 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Jeanne Thune 767 St. John S. Way City: Hendersonville State: NC Zip Code: 28791 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229064 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Virginia Kuhn 168 Sterling Point City: Winston Salem State: NC Zip Code: 27104 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229065 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period 18.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Camille Kurtz 2401 Calvert Street NW City: Washington State: DC Zip Code: 20008 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229066 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kirsten Gillibrand Contributions		Transaction ID: 42229067 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Ethel Gould 757 Flume Court		Amount of Each Disbursement this Period 50.00
City Milpitas State CA Zip Code 95035	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Kirsten Gillibrand Contributions		Transaction ID: 42229068 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Marilyn Meardon 24 Rhode Island Avenue		Amount of Each Disbursement this Period 25.00
City Providence State RI Zip Code 02906	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kirsten Gillibrand Contributions		Transaction ID: 42229069 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address Gloria Hern 7447 Sylmar Avenue		Amount of Each Disbursement this Period 100.00
City Van Nuys State CA Zip Code 91405	[MEMO ITEM] MEMO	
Purpose of Disbursement Candidate Contrib Earmarked		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address S. Michael Lunn 1601 Elm Street # 2000 City Dallas State TX Zip Code 75313 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229070 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Patricia Smith 234 Crescent Drive City Orinda State CA Zip Code 94563 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229071 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Sharon Lewis 8842 San Badger Way City Elk Grove State CA Zip Code 95624 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229072 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Carol Kaplan 711 Adams Street City Hoboken State NJ Zip Code 07030 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229073 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address William Swartchild 119 Erledon Road City Tenafly State NJ Zip Code 07670 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229074 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Laura Iraci 1021 Golf Court City Mountain View State CA Zip Code 94040 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229075 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Miriam Karger 7 Rivermead Road City: Peterborough State: NH Zip Code: 03458 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229076 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Dolores Stickler 2323 Pittston Ave City: Scranton State: PA Zip Code: 18505 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229077 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Phyllis Cohen 6619 Mercer Street City: Houston State: TX Zip Code: 77005 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229078 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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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

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(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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Jan Schochet 6511 Fallenbridge Road City Chapel Hill State NC Zip Code 27517 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229079 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Martha Poling 1532 Sinclair Drive City McLean State VA Zip Code 22101 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229080 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Victoria Perkins 11000 Huntover Drive City Rockville State MD Zip Code 20852 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229081 Date of Disbursement 04 / 01 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Ethel Sutton 61 Brown Road City Scarsdale State NY Zip Code 10583 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229082 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Mary Ellis 225 Clinton Street City Saratoga Springs State NY Zip Code 12866 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229083 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Patricia Reynolds 1180 Woods Circe NE City Atlanta State GA Zip Code 30324 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229084 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 10.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Sue Krenk 6 Main Dock City Sausalito State CA Zip Code 94965 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229085 Date of Disbursement 04 / 15 / 2007 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Veronica Combs 2232 Gary Drive City New Albany State IN Zip Code 47150 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229086 Date of Disbursement 04 / 01 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Barbara Krause 1509 N Garfield Street City Arlington State VA Zip Code 22201 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229087 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Gayle Kaplan 5929 Walnut Dr City Minneapolis State MN Zip Code 55436 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229088 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Mark Garrett 58 Hawthorne Terrace City Leonia State NJ Zip Code 07605 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229089 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Joan McCauley 542 Santa Ana Avenue City Newport Beach State CA Zip Code 92663 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229090 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 200.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Carl Langenhop 2200 Greentree N. Apt. 1107 City Clarksville State IN Zip Code 47129 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229091 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Marjorie James 14416 Tanglewood Dr. City Farmers Branch State TX Zip Code 75234 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229092 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Joyce Newcomb 5355 Pooks Hill Road City Bethesda State MD Zip Code 20814 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229093 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 15.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Elsie Sweeney 21775 Woodland Crest Drive City: Woodland Hls State: CA Zip Code: 91364 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229094 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Eleanor Weinstock 525 South Flagler Drive City: West Palm Beach State: FL Zip Code: 33401 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229095 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Mary Jourdan 2140 Santa Cruz Ave., # E202 City: Menlo Park State: CA Zip Code: 94025 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229096 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Hal Reed 144 Orchard Hill Drive City South Windsor State CT Zip Code 06074 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229097 Date of Disbursement 04 / 07 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Linda Daube 50 Scarborough Road City Manchester State CT Zip Code 06040 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229098 Date of Disbursement 04 / 18 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Karen Hofmeister 2121 Kirby Drive City Houston State TX Zip Code 77019 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229099 Date of Disbursement 04 / 02 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s)
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Detailed Summary Page

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Nancy Fogel 4881 Cobbler Court City Pleasanton State CA Zip Code 94566 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229100 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Barbara Malcolm 4775 S Harbor Dr Apt 101 City Vero Beach State FL Zip Code 32967 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229101 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Edith Hersher 212 Beers Road City Easton State CT Zip Code 06612 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229102 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Renate Wasserman 102 Tonset Road City: Orleans State: MA Zip Code: 02653 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229103 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Suzanne Winn 1414 Main St City: Lynnfield State: MA Zip Code: 01940 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229104 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Merrilee Cate 4505 N. O'Connor Road City: Irving State: TX Zip Code: 75062 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229105 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Luann Abrahams 45 Walnut Street City Somerville State MA Zip Code 02143 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229106 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Charlotte White 21100 Gary Drive City Castro Valley State CA Zip Code 94546 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229107 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Judy Lane 114 Dennis Whitney Road City Oakham State MA Zip Code 01068 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229108 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3X)
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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Priscilla Meyer 4424 Athens Avenue City Waco State TX Zip Code 76710 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229109 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Ruth Mead 203 Thorn Hollow Drive City Apex State NC Zip Code 27523 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229110 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Laura Fisher 44 Broad Brook Road City Bedford Hills State NY Zip Code 10507 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229111 Date of Disbursement 04 / 23 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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TOTAL This Period (last page this line number only) ▶	[]

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

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(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)
EMILY's List

<p>A. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42229112</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="11"/> <input type="text" value="2007"/></p>
<p>Mailing Address Eugene Hildreth 2000 Cambridge Avenue</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>
<p>City Wyoming State PA Zip Code 19610</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>

<p>B. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42229113</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="07"/> <input type="text" value="2007"/></p>
<p>Mailing Address Susan Rothenberg 420 12 St H3L</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>City Brooklyn State NY Zip Code 11215</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>

<p>C. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42229114</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="04"/> <input type="text" value="2007"/></p>
<p>Mailing Address Constance Moore 419 South Camac Street</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>City Philadelphia State PA Zip Code 19147</p>	<p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] MEMO</p>

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Ruth Swanton 41 Howard Avenue City: New Haven State: CT Zip Code: 06519 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229115 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Constance Bennett 200 Ankeny Street City: San Francisco State: CA Zip Code: 94134 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229116 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Margaret Schadler 4024 Windsor Drive City: Niskayuna State: NY Zip Code: 12309 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229117 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Phyllis Broyles P.O. Box 2216 City: McKinleyville State: CA Zip Code: 95519 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229118 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 40.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: William Thibodeaux 113 Oakdale Loop City: Houma State: LA Zip Code: 70360 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229119 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Cheryl Kraywinkel 401 Westacre Road Apt. 32 City: West Sacramento State: CA Zip Code: 95691 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229120 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kirsten Gillibrand Contributions		Transaction ID: 42229121 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Jean Reisen 2 Wentworth Rd.		Amount of Each Disbursement this Period 100.00
City Summit	State NJ	
Zip Code 07901		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Kirsten Gillibrand Contributions		Transaction ID: 42229122 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address Joanna Taylor 3701 27th Street N.		Amount of Each Disbursement this Period 50.00
City Arlington	State VA	
Zip Code 22207		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Kirsten Gillibrand Contributions		Transaction ID: 42229123 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Kathryn Moore 1307 Peachwood Lane		Amount of Each Disbursement this Period 10.00
City Bowie	State MD	
Zip Code 20716		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

<p>A. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42229124</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	6		2	0	7														
<p>Mailing Address Kathleen McCormick 19928 Wissler Ranch Road</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00																			
50.00																						
<p>City Black Forest State CO Zip Code 80908</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>B. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42229125</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	7														
<p>Mailing Address Mary Cope 370 Riverside Drive, Apt. 15C</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00																			
50.00																						
<p>City New York State NY Zip Code 10025</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>C. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: 42229126</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	7														
<p>Mailing Address Margaret Cardoza 3656 Pine St</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00																			
25.00																						
<p>City Castro Valley State CA Zip Code 94546</p>																						
<p>Purpose of Disbursement Candidate Contrib Earmarked</p>		<p>[MEMO ITEM] MEMO</p>																				
<p>Candidate Name</p>																						
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td></td> </tr> </table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions		Transaction ID: 42229127																					
Full Name (Last, First, Middle Initial)		Date of Disbursement																					
Mailing Address Suzanne Brown 19650 Timberline Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	6		2	0	0	7														
City Brookfield State WI Zip Code 53045		Amount of Each Disbursement this Period																					
Purpose of Disbursement Candidate Contrib Earmarked		<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>		100.00																			
100.00																							
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO																					
State: District:																							

B. Kirsten Gillibrand Contributions		Transaction ID: 42229128																					
Full Name (Last, First, Middle Initial)		Date of Disbursement																					
Mailing Address Elizabeth Boris 3516 Duff Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	6		2	0	0	7														
City Falls Church State VA Zip Code 22041		Amount of Each Disbursement this Period																					
Purpose of Disbursement Candidate Contrib Earmarked		<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>		250.00																			
250.00																							
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO																					
State: District:																							

C. Kirsten Gillibrand Contributions		Transaction ID: 42229129																					
Full Name (Last, First, Middle Initial)		Date of Disbursement																					
Mailing Address Marie Blount 35 Young Avenue		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	6		2	0	0	7														
City Croton Hdsn State NY Zip Code 10520		Amount of Each Disbursement this Period																					
Purpose of Disbursement Candidate Contrib Earmarked		<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>		100.00																			
100.00																							
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO																					
State: District:																							

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Judy Dudley 349 Arthur Ave City Aptos State CA Zip Code 95003 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229130 Date of Disbursement 04 / 06 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Kathryn Kuehl 3400 Sullivan Court City Modesto State CA Zip Code 95356 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229131 Date of Disbursement 04 / 11 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Mignon Adams 1922 Pemberton Street City Philadelphia State PA Zip Code 19146 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229132 Date of Disbursement 04 / 04 / 2007 Amount of Each Disbursement this Period 35.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Barbara Lindblom 1915 Diamond Court City: Santa Rosa State: CA Zip Code: 95404 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229133 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period _____ 50.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Martha Jesnak 3213 Buttercup Ct City: Adamstown State: MD Zip Code: 21710 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229134 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period _____ 25.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address: Clay Kirk 320 East 72nd St., Apt. 5C City: New York State: NY Zip Code: 10021 Purpose of Disbursement: Candidate Contrib Earmarked Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 42229135 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period _____ 1000.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	_____ 0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address James Douglas 32 Lenox Road # C8 City Brooklyn State NY Zip Code 11226 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229136 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 20.00 [MEMO ITEM] MEMO
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B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Cheryl Wilfong 314 Partridge Road City E Dummerston State VT Zip Code 05346 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229137 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Molly Oberbillig 1907 Parkwood Drive SE City Olympia State WA Zip Code 98501 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229138 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 25.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kirsten Gillibrand Contributions		Transaction ID: 42229139 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Barbara Corwin 1230 Winding Ridge Terrace		Amount of Each Disbursement this Period 100.00
City Colorado Springs	State CO	
Zip Code 80919		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Kirsten Gillibrand Contributions		Transaction ID: 42229140 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address B. Prem 112 Lundy Lane		Amount of Each Disbursement this Period 40.00
City Lopez Island	State WA	
Zip Code 98261		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kirsten Gillibrand Contributions		Transaction ID: 42229141 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address Shirley Peters 3055 Autumn Court		Amount of Each Disbursement this Period 25.00
City Winter Park	State FL	
Zip Code 32792		[MEMO ITEM] MEMO
Purpose of Disbursement Candidate Contrib Earmarked		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

<p>A. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Paula Roloff 19 Acacia Lane</p> <p>City Redwood City State CA Zip Code 94062</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229142</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Kristin Menon PO Box 6116</p> <p>City Boulder State CO Zip Code 80306</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229143</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Joan Best PO Box 412</p> <p>City Brightwaters State NY Zip Code 11718</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229144</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

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

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 505 / 1028

<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)
EMILY's List

A. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Marilyn Fitzgerald 1838 Fonthill Ct City Mc Lean State VA Zip Code 22102 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229145 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
--	--	--

B. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Pauline Andrews P.O. Box 5487 City Santa Monica State CA Zip Code 90409 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229146 Date of Disbursement 04 / 30 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
---	--	--

C. Kirsten Gillibrand Contributions Full Name (Last, First, Middle Initial) Mailing Address Janet Spence P.O. Box 465 City Dennis State MA Zip Code 02638 Purpose of Disbursement Candidate Contrib Earmarked Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: 42229147 Date of Disbursement 04 / 20 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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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)
EMILY's List

<p>A. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Karen Mahan 2801 Patricia Avenue</p> <p>City Antioch State CA Zip Code 94509</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229148</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Jane Einbender 10 MacDougal Alley</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229149</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. Kirsten Gillibrand Contributions</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Barbara Debs 1 Beekman Place # 7A</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Candidate Contrib Earmarked</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 42229150</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathleen Hall		Transaction ID: SB28A-109633 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 2034 N Old Stage Rd		Amount of Each Disbursement this Period 15.00
City Mount Shasta State CA Zip Code 96067	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Stephanie Free		Transaction ID: SB28A-109638 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 1120 Cornell, Apt. One		Amount of Each Disbursement this Period 40.00
City Albany State CA Zip Code 94706	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dorothea Helman		Transaction ID: SB28A-109545 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 738 Torrey Pines Avenue		Amount of Each Disbursement this Period 10.00
City Sun City Center State FL Zip Code 33573	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	65.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Connie Ellerbach		Transaction ID: SB28A-109637 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 880 Sea Island Lane		Amount of Each Disbursement this Period 300.00
City State Zip Code Foster City CA 94402		
Purpose of Disbursement Refund	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Linda Bischoff		Transaction ID: SB28A-109636 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 3409 Del Monte Drive		Amount of Each Disbursement this Period 1000.00
City State Zip Code Houston TX 77019		
Purpose of Disbursement Refund	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Roberta Zorzynski		Transaction ID: SB28A-109644 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1352 Huston Road		Amount of Each Disbursement this Period 100.00
City State Zip Code Walnut Creek CA 94597		
Purpose of Disbursement Refund	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1400.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Richard Gause		Transaction ID: SB28A-109640 Date of Disbursement MM / DD / YYYY 04 / 26 / 2007	
Mailing Address 8813 Williamson Dr		Amount of Each Disbursement this Period 25.00	
City Elk Grove	State CA		Zip Code 95624
Purpose of Disbursement Refund			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. Pam Rolph		Transaction ID: SB28A-109642 Date of Disbursement MM / DD / YYYY 04 / 26 / 2007	
Mailing Address 132 San Felipe Avenue		Amount of Each Disbursement this Period 250.00	
City San Francisco	State CA		Zip Code 94080
Purpose of Disbursement Refund			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) C. Susan Fisher		Transaction ID: SB28A-109544 Date of Disbursement MM / DD / YYYY 04 / 30 / 2007	
Mailing Address PO Box 349		Amount of Each Disbursement this Period 100.00	
City W Stockbridge	State MA		Zip Code 01266
Purpose of Disbursement Refund			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	1840.00

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 510 / 1028

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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Annie's List		Transaction ID: SB29-108945 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address PO Box 699		Amount of Each Disbursement this Period 2500.00
City Austin State TX Zip Code 78767	Category/ Type	
Purpose of Disbursement Transfer to Non-Federal Fund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. EMILY's List Non-Federal #1		Transaction ID: SB29-109143 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1120 Connecticut Ave NW Suite 1100		Amount of Each Disbursement this Period 1650.00
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement Transfer to Non-Federal Fund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

P. Ewing cntrb orig reported 3/09/07

Full Name (Last, First, Middle Initial) C. EMILY's List - Non-Federal #2		Transaction ID: SB29-109144 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1120 Connecticut Ave NW Suite 1100		Amount of Each Disbursement this Period 50.00
City Washington State DC Zip Code 20036	Category/ Type	
Purpose of Disbursement Transfer to Non-Federal Fund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Shorey cntrb orig reported 3/01/07

SUBTOTAL of Disbursements This Page (optional) ▶	4200.00
TOTAL This Period (last page this line number only) ▶	4200.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) EMILY's List		FEC IDENTIFICATION NUMBER C C00193433
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee MacWilliams, Robinson & Partners, Inc.		Date M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 1660 L Street, NW Suite 301		Amount -5467.72
City State Zip Code Washington DC 20036		Transaction ID: SE24-109645
Purpose of Expenditure Radio Refund		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____
		-5467.72

(a) SUBTOTAL of Itemized Independent Expenditures	-5467.72
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	-5467.72
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Caroline C. Fines Signature	Date M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 512 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Rosalind S. Abernathy		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 230 Kings Row Drive		Transaction ID: 2239911
City State Zip Code Little Rock AR 72207	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Univ. of Arkansas	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mrs. Barbara Abramowitz		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 7832 16th Street NW		Transaction ID: 2232586
City State Zip Code Washington DC 20012	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Mrs. Barbara Abramowitz		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 7832 16th Street NW		Transaction ID: 2234884
City State Zip Code Washington DC 20012	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 513 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Barbara Abramowitz		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 7832 16th Street NW		Transaction ID: 2233990
City State Zip Code Washington DC 20012	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Wendy Peter Abt		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 19 Follen		Transaction ID: 2233226
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer WPA Occupation Investor	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Boley Adelman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address P.O. Box 225		Transaction ID: 2239913
City State Zip Code Moro IL 62067	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer International Institute - St. Louis Occupation ESL Specialist	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 514 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bernyce Adler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 10101 Collins Avenue Apt. 16E		Transaction ID: 2239474
City State Zip Code Bal Harbour FL 33154	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Elaine Adler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 910 Franklin Lakes Road		Transaction ID: 2239978
City State Zip Code Franklin Lakes NJ 07417	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Myron Mfg. Corp. Business	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Polly H. Agee		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 2818 N. Nottingham Street		Transaction ID: 2232587
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Agee & Company Consultant	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	6300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 515 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Florence Ellison Ailes		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 1165 Needle Pointe		Transaction ID: 2233515	
City State Zip Code Cheboygan MI 49721	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 575.00		

Full Name (Last, First, Middle Initial) B. Ms. Florence Ellison Ailes		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 1165 Needle Pointe		Transaction ID: 2235362	
City State Zip Code Cheboygan MI 49721	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 575.00		

Full Name (Last, First, Middle Initial) C. Mr. William G. Albertson		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 55075 Main Road		Transaction ID: 2236987	
City State Zip Code Southold NY 11971	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 516 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Coert Almstead		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 15 Joslen Heights Road		Transaction ID: 2239023	
City State Zip Code Hudson NY 12534	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Joslen Heights Corp.	Occupation Office Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Barbara A. Aman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4809 Ewing Avenue S		Transaction ID: 2238685	
City State Zip Code Minneapolis MN 55410	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer American National Bank	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Ms. Jean L. Ambrose		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 7305 Westover Way		Transaction ID: 2233902	
City State Zip Code Somerset NJ 08873	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 517 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bettye J. Anderson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 7003 Pauline Circle		Transaction ID: 2233179	
City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Jane Anne Anderson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 2047 Castilian Drive		Transaction ID: 2231639	
City State Zip Code Los Angeles CA 90068	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer/Director	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Jane Anne Anderson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 2047 Castilian Drive		Transaction ID: 2233428	
City State Zip Code Los Angeles CA 90068	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Writer/Director	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 518 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan M. Anderson

Mailing Address 2427 Kessler Blvd.

City Lincoln State NE Zip Code 68502

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

Name of Employer Woods Bros. Occupation Real estate education

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238629

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Jean M. Andrews

Mailing Address 15081 Ford Road Pt. 319

City Dearborn State MI Zip Code 48126

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238565

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Pauline Andrews

Mailing Address PO Box 5487

City Santa Monica State CA Zip Code 90409

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

Name of Employer Peoples Group, Inc. Occupation Assoc. Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240815

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 519 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Marcia Ann Angle

Mailing Address 221 Deer Chase Ln

City State Zip Code
Durham NC 27705

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

Name of Employer Dulce Univ. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2007

Transaction ID: 2240302

Amount of Each Receipt this Period
250.00

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

Mailing Address 414 Old Lancaster Rd.
#103

City State Zip Code
Haverford PA 19041

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2007

Transaction ID: 2238458

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Arletta M. Ashe

Mailing Address 10 Prout Place

City State Zip Code
Cape Elizabeth ME 04107

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2007

Transaction ID: 2234585

Amount of Each Receipt this Period
85.00

SUBTOTAL of Receipts This Page (optional)	▶	1335.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 520 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia B. Avnet		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 17331 Labrador Street		Transaction ID: 2239357	
City State Zip Code Northridge CA 91325		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Gary Avnet, Inc. VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Emma R Ayers		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 8717 Delmar Blvd. # 2W		Transaction ID: 2234426	
City State Zip Code St. Louis MO 63124		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation N A organist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara A. Babcock		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 835 Mayfield Avenue		Transaction ID: 2233219	
City State Zip Code Stanford CA 94305		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Stanford Law School Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 521 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marta K. Bach		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 11 High Street		Transaction ID: 2233324
City State Zip Code Marblehead MA 01945	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Investor	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Gearle Bacote		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 7
Mailing Address 7604 Stratfield Lane		Transaction ID: 2232375
City State Zip Code Laurel MD 20772	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer DRC ES, LLC Occupation Mid Atlantic Regional Manager	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Sue Bailey		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 7101 Glenbrook Road		Transaction ID: 2236975
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Physician	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 522 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lotte Bailyn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 170 Clifton Street		Transaction ID: 2238831	
City Belmont	State MA	Zip Code 02478	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer MIT	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Pat K. Bakalian		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 814 Escalona Drive		Transaction ID: 2234026	
City Santa Cruz	State CA	Zip Code 95060	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Ms. Carol Baker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 306 Brentford Road		Transaction ID: 2238778	
City Haverford	State PA	Zip Code 19041	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 523 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Golda G. Baker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 9333 Memorial Drive #102		Transaction ID: 2232806
City State Zip Code Houston TX 77024	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The AFP Group	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Lawrence C. Baldwin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 13708 Leland Road		Transaction ID: 2233840
City State Zip Code Centreville VA 20120	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Virginia Baldwin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 901 Highland Avenue		Transaction ID: 2234428
City State Zip Code Del Mar CA 92014	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Fitness Trainer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 524 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gwen E. Ball		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 311 S. Commerce Street		Transaction ID: 2233244
City State Zip Code Natchez MS 39120	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Professor/Writer Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Dr. Susan K. Ball		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 113 N Bread Street Apt. 9D		Transaction ID: 2238462
City State Zip Code Philadelphia PA 19106	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Marion S Ballard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 4413 Chalfont Place		Transaction ID: 2231909
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 525 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Patrick J Barbush		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 2611 Taft Court		Transaction ID: 2233146
City Fullerton	State CA	Zip Code 92835
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Carole A. Barham		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 13782 Monaco Way		Transaction ID: 2232888
City Palm Beach Gdns	State FL	Zip Code 33410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Ms. Carole A. Barham		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 13782 Monaco Way		Transaction ID: 2239391
City Palm Beach Gdns	State FL	Zip Code 33410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 526 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Kathryn E. Barnard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 11508 Durland Avenue NE		Transaction ID: 2234628
City State Zip Code Seattle WA 98125	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Univ. of Washington	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

B. Full Name (Last, First, Middle Initial) Ms. Antonia Barnhart		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 7
Mailing Address 523 Wainaku St.		Transaction ID: 2234097
City State Zip Code Hilo HI 96720	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer 523 Wainaku St.	Occupation video production	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Dr. Herbert C Bartling		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1610 Thrush Court Circle		Transaction ID: 2240646
City State Zip Code San Antonio TX 78248	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Eastern Illinois Univ. (Retired)	Occupation Director of Academic Testing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1335.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 527 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Bruce W. Bastian		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 1384 N. 450 E		Transaction ID: 2234048
City State Zip Code Orem UT 84097	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Joan Baxter		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1072 Foxglove Sp 120		Transaction ID: 2239134
City State Zip Code Salt Lake City UT 84123	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Shirley C. Beal		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 39 Main Street		Transaction ID: 2240884
City State Zip Code Stonington CT 06378	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 528 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marlys J. Becker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1279 Central Ave N		Transaction ID: 2235046
City State Zip Code Valley City ND 58072	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Margaret A. Behrle		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 437		Transaction ID: 2238725
City State Zip Code Granham NH 03753	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Iris Belding		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 826 W. Guanajuato Drive		Transaction ID: 2239260
City State Zip Code Claremont CA 91711	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	410.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 529 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Bennett		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address PO Box 507		Transaction ID: 2231860
City State Zip Code Jamestown RI 02835	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer DBM&B Advertising	Occupation TV Commercial Producer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert Bentz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 3001 Valley Brook Drive		Transaction ID: 2233018
City State Zip Code Champaign IL 61822	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Mr. Robert Bentz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 3001 Valley Brook Drive		Transaction ID: 2235727
City State Zip Code Champaign IL 61822	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	365.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 530 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia J. Benz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 9767 Atelier Drive		Transaction ID: 2233167
City State Zip Code Anchorage AK 99507	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Wells Fargo Bank	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mrs. Robert R. Berg		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 414 Brookside Drive E.		Transaction ID: 2237015
City State Zip Code Bryan TX 77801	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Dr. Barbara H. Bergmann		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 966 SE Sunwood Court		Transaction ID: 2233157
City State Zip Code Bend OR 97702	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 531 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Debra B. Bergoffen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 1678 Wainwright Drive		Transaction ID: 2232381	
City State Zip Code Reston VA 20190	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer George Mason Univ.	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Jean Bergstein		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 3690 Ashworth Drive		Transaction ID: 2233242	
City State Zip Code Cincinnati OH 45208	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. Ms. Nancy Bergstrom		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 3935 Ramble Creek Drive		Transaction ID: 2235359	
City State Zip Code Missouri City TX 77459	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer UTH		Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

SUBTOTAL of Receipts This Page (optional) ▶	1835.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 532 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marjorie Berk

Mailing Address 7 E 14th Street, Apt.1117

City State Zip Code
New York NY 10003

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2236105

Amount of Each Receipt this Period
85.00

B. Full Name (Last, First, Middle Initial)
Ms. Shelly G. Bermont

Mailing Address 220 Costanera Road

City State Zip Code
Coral Gables FL 33143

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: 2239499

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Jill Viney Bernard

Mailing Address 7 W. 81st Street # 7A

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: 2240067

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1335.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 533 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Bernhard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 22 Cedar Lane		Transaction ID: 2239409
City State Zip Code Port Washington NY 11050	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Ms. Elayne Bernstein-Schwartz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1621 Boathouse Circle Apt HA121		Transaction ID: 2239745
City State Zip Code Sarasota FL 34231	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Administrator	
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Mr. Murray L. Berrie		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 14745 Draft Horse Ln		Transaction ID: 2235105
City State Zip Code Wellington FL 33414	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 534 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Susan D. Berrington		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 5920 Granby Rd.		Transaction ID: 2240462	
City Derwood	State MD	Zip Code 20855	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1550.00		

Full Name (Last, First, Middle Initial) B. Ms. Mary-Kathryn Bertelli		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007	
Mailing Address 75 Cambridge Pkwy P		Transaction ID: 2233627	
City Cambridge	State MA	Zip Code 02142	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Ms. Sharon Bertsch		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2007	
Mailing Address 5233 Pullman Avenue, N.E.		Transaction ID: 2237216	
City Seattle	State WA	Zip Code 98105	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 535 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Frances B. Bethea		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address PO Box 430		Transaction ID: 2240627
City State Zip Code Kountze TX 77625	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Penelope P. Biggs		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 240 E 47th Street., Apt. 23D		Transaction ID: 2240370
City State Zip Code New York NY 10017	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Frank A Bille		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 100 Corporate Place 203		Transaction ID: 2239782
City State Zip Code Peabody MA 01960	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation C.P.A.	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 536 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Vincent F. Biondo, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 12964 Longboat Way		Transaction ID: 2237039
City State Zip Code Del Mar CA 92014	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Linda Bischoff		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 3409 Del Monte Drive		Transaction ID: 2233015
City State Zip Code Houston TX 77019	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Dr. Virginia Y. Blacklidge		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 663 Coventry Road		Transaction ID: 2231412
City State Zip Code Kensington CA 94707	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychiatrist Aggregate Year-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 537 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Virginia Y. Blackledge		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 663 Coventry Road		Transaction ID: 2237248	
City State Zip Code Kensington CA 94707	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychiatrist Aggregate Year-to-Date ▼ 2300.00		

Full Name (Last, First, Middle Initial) B. Ms. Sandra I. Blair		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 1815 Chestnut Street		Transaction ID: 2232191	
City State Zip Code Berkeley CA 94702	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Ms. Sandra I. Blair		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1815 Chestnut Street		Transaction ID: 2237437	
City State Zip Code Berkeley CA 94702	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 538 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Donna W Blake		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 7	
Mailing Address 10856 Parcel Court		Transaction ID: 2239500	
City State Zip Code Oakton VA 22124	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer VisiTech, Ltd.	Occupation Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00		

Full Name (Last, First, Middle Initial) B. Ms. Jane R. Blanch		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 644 Indian Mound Street		Transaction ID: 2239129	
City State Zip Code Wayzata MN 55391	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Businesswoman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Kimberly Blanchard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 64 Gibson Road		Transaction ID: 2239198	
City State Zip Code Ashburnham MA 01430	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 539 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan T Blessing		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 8990 Bay Colony Drive #1401		Transaction ID: 2233223	
City State Zip Code Naples FL 34108	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Frima H. Blumenthal		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 200 E Delaware, Apt 3B		Transaction ID: 2239997	
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Billie M. Bobbitt		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 3003 Cisco Road W14		Transaction ID: 2234436	
City State Zip Code Sidney OH 43456	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 540 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elspeth G. Bobbs		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 630 East Alameda		Transaction ID: 2231415	
City State Zip Code Santa Fe NM 87501	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mr. Walt S. Bobo		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 5610 Saint Moritz Street		Transaction ID: 2239307	
City State Zip Code Bellaire TX 77401	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Mechanical Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Ms. Marcia G. Bograd		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 325 Pompton Avenue		Transaction ID: 2239003	
City State Zip Code Pompton Lakes NJ 07442	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 541 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Victor Bollman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 15735 N.E. Browndale Farm Road		Transaction ID: 2237044	
City State Zip Code Aurora OR 97002	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) B. Ms. Elaine S. Booth		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 3 Winterbranch		Transaction ID: 2233945	
City State Zip Code Irvine CA 92604	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Mr. T. William Booth		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address 5521 17th Ave. NE		Transaction ID: 2233850	
City State Zip Code Seattle WA 98105	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 542 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen J. Bopp		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 6505 Lily Dhu Lane		Transaction ID: 2234384	
City State Zip Code Falls Church VA 22044	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self-employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) B. Ms. Judith P. Borden		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 16749 Addison Street		Transaction ID: 2234416	
City State Zip Code Encino CA 91436	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Financial Administrator	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Mrs. Margaret B. Boverman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address 14809 Pennfield Cir Apt 201		Transaction ID: 2233839	
City State Zip Code Silver Spring MD 20906	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 543 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jacqueline E Boynton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 3945 N. Harcourt Place		Transaction ID: 2240654	
City State Zip Code Milwaukee WI 53211	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Law Office of Jacqueline Boynton	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00		

Full Name (Last, First, Middle Initial) B. Ms. Barbara Braak		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 3829 82nd Street		Transaction ID: 2239963	
City State Zip Code Des Moines IA 50322	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mr. Ellis Bradford		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 3000 Galloway Ridge Apt. C208		Transaction ID: 2240390	
City State Zip Code Pittsboro NC 27312	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 544 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Andrew W Brainerd		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2007	
Mailing Address 612 Deming Place		Transaction ID: 2233665	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation attorney retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Robin M. Brand		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007	
Mailing Address 42 Bates St., NW		Transaction ID: 2236830	
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Gill Action Occupation COO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) C. Mrs. Cherie A. Brant		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2007	
Mailing Address 3157 Breaker Drive		Transaction ID: 2232124	
City State Zip Code Ventura CA 93003	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed Occupation Writer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 545 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Donna Brasley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 37 W. 72 Street # 16E		Transaction ID: 2236315	
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) B. Ms. Betty S. Brendemuehl		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 2978 Spring Street		Transaction ID: 2238531	
City State Zip Code Marianna FL 32446	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Ms. Kathleen Brennan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 4778 Lancashire Lane		Transaction ID: 2232661	
City State Zip Code Tallahassee FL 32309	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation community volunteer Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	6085.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 546 / 1028		
	<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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Alana Brenner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1330 Radclyffe Rd		Transaction ID: 2237400	
City State Zip Code Orlando FL 32804	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mrs. Marcella Brenner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 7204 Pomander Lane		Transaction ID: 2233237	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 1100.00		

Full Name (Last, First, Middle Initial) C. Mrs. Marcella Brenner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 7204 Pomander Lane		Transaction ID: 2238769	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 1100.00		

SUBTOTAL of Receipts This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 547 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Jessop Brewster		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 242 Rivermead Rd		Transaction ID: 2239684
City State Zip Code Peterborough NH 03458	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Joan Jessop Brewster		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 242 Rivermead Rd		Transaction ID: 2239685
City State Zip Code Peterborough NH 03458	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Lynn Briody		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 4420-173 Avenue SE		Transaction ID: 2238993
City State Zip Code Bellevue WA 98006	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 548 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carole J Brodtkin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 412 Ferrell Rd.		Transaction ID: 2237014	
City State Zip Code Mullica Hill NJ 08062	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer National Park Service	Occupation Park Ranger		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Julie Broida		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 3209 Pearl Street		Transaction ID: 2240502	
City State Zip Code Santa Monica CA 90405	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Alice H. Brown		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 6 Timson Road, Apt. B3		Transaction ID: 2237253	
City State Zip Code Asheville NC 28803	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 549 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Catherine D. Brown		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 93 Elm Road		Transaction ID: 2239188
City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. David Brown		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 2696 Dundee Gln		Transaction ID: 2237218
City State Zip Code Escondido CA 92026	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Thomas Brown		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 4241 N. Sand Road		Transaction ID: 2238543
City State Zip Code Hershey NE 69143	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Farmer	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 550 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Priscilla Browning		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address One Pleasant Grove Lane		Transaction ID: 2232392
City State Zip Code Ithaca NY 14850	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Unemployed	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marcia T. Bruce		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 44 Miners Trail		Transaction ID: 2240362
City State Zip Code Irvine CA 92620	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Realtor	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Barbara S. Bruner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 795 Hammond Drive #407		Transaction ID: 2239390
City State Zip Code Atlanta GA 30328	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2800.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 551 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Evan Buck		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 605 Bendview Drive		Transaction ID: 2237411	
City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired		Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Frances Bull		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 3467 Craig Road		Transaction ID: 2240399	
City Ann Arbor	State MI	Zip Code 48103	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired		Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Lucinda W. Bunnan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 3910 Randall Mill Road, N.W.,		Transaction ID: 2232584	
City Atlanta	State GA	Zip Code 30327	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Photographer		Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	3100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 552 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan L. Burke		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 3815 The Oak Rd		Transaction ID: 2232416
City Philadelphia State PA Zip Code 19129	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Mintz Levin Occupation Member	Aggregate Year-to-Date ▼ 1100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Susan L. Burke		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 3815 The Oak Rd		Transaction ID: 2232597
City Philadelphia State PA Zip Code 19129	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Mintz Levin Occupation Member	Aggregate Year-to-Date ▼ 1100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Jacqueline Burstein		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 982 Frazier Road		Transaction ID: 2239606
City Rydal State PA Zip Code 19046	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 553 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Verona D. Burton

Mailing Address 512 Hickory Street

City State Zip Code
Mankato MN 56001

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231734

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Verona D. Burton

Mailing Address 512 Hickory Street

City State Zip Code
Mankato MN 56001

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238545

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Pamela Buttery

Mailing Address PO Box 1258
1553 Riata Road

City State Zip Code
Pebble Beach CA 93953

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2238792

Amount of Each Receipt this Period
3700.00

SUBTOTAL of Receipts This Page (optional)	3900.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 554 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Hope Byer		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 150 E. 69th Street # 16E		Transaction ID: 2238753	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Linda C. Cain		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 10820 Carmichael Road		Transaction ID: 2238249	
City State Zip Code Knoxville TN 37932	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Administrator	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Linda Calvert		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 101 FM 3237 Suite F		Transaction ID: 2240637	
City State Zip Code Wimberley TX 78676	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Clinical Psychologist	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 555 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Virginia A. Camfield		Date of Receipt M M / D D / Y Y Y Y 04 / 20 / 2007	
Mailing Address 1117 Milford Street		Transaction ID: 2237016	
City State Zip Code Houston TX 77006	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker/Photographer Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Julie Carithers		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007	
Mailing Address 2910 Brushycreek Road		Transaction ID: 2234497	
City State Zip Code Greer SC 29650	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer sole proprietor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Anesthetist Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) C. Ms. Andrea S. Carlise		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007	
Mailing Address 2835 Johnson Avenue		Transaction ID: 2235252	
City State Zip Code Alameda CA 94501	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self-employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 340.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 556 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Donna M Carlon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 1905 Edgewood Drive		Transaction ID: 2235722	
City State Zip Code Edmond OK 73013		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer University of Central Oklahoma		Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) B. Mr. Curtis W. Carmean		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7	
Mailing Address 24 Springtree Lane		Transaction ID: 2231473	
City State Zip Code Yardley PA 19067		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mrs. Walta W Carmichael		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 15317 Stoney Spring Rd.		Transaction ID: 2233946	
City State Zip Code Edmond OK 73013		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	685.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 557 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy M. Carr		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 12326 27th Street		Transaction ID: 2233836
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self Occupation antique dealer	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Byrle L. Carson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address PO Box 1325		Transaction ID: 2240364
City State Zip Code Thermopolis WY 82443	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sally Carson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 3153 N 17th Street		Transaction ID: 2239351
City State Zip Code Arlington VA 22201	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Dept. of Defense, US Marine Corps Occupation Program Manager	Aggregate Year-to-Date ▼ 685.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 558 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Phoebe A. Cassidy		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1343 W Baltimore Pike #E304		Transaction ID: 2238735	
City State Zip Code Media PA 19063	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. Kicab Castaneda-Mendez		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 112 Rhododendron CT		Transaction ID: 2233175	
City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bausch & Lomb Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. Mr. Kicab Castaneda-Mendez		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 112 Rhododendron CT		Transaction ID: 2238815	
City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bausch & Lomb Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director Aggregate Year-to-Date ▼ 450.00		

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 559 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Katherine A. Castor

Mailing Address 3012 Harbor View Avenue

City Tampa State FL Zip Code 33611

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

Name of Employer Broad and Cassel Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2234754

Amount of Each Receipt this Period
85.00

B. Full Name (Last, First, Middle Initial)
Mr. Randy R Castro

Mailing Address 4305 Lakeview Drive SE

City Port Orchard State WA Zip Code 98366

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 7

Transaction ID: 2233563

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Damon M. Cathey

Mailing Address 530 Buckingham Road Apt 711

City Richardson State TX Zip Code 75081

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

Name of Employer Tektronix Occupation Computer Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: 2240034

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 585.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 560 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Madeline H. Caviness		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7	
Mailing Address 60 Elm Street		Transaction ID: 2231544	
City State Zip Code Charlestown MA 02129		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Tufts University Occupation Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mr. Charles Cerf		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 2700 Chesapeake Street NW		Transaction ID: 2234417	
City State Zip Code Washington DC 20008		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Investor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Rachel Chanoff		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 130 Jane Street #5S		Transaction ID: 2234743	
City State Zip Code New York NY 10004		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Art and Film Administrator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional) ▶	6085.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 561 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ellen M. Charles

Mailing Address 1408 31st Street NW

City State Zip Code
Washington DC 20007

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

Name of Employer Self Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2238782

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Ms. Cynthia Chase

Mailing Address 909 Wyckott Road

City State Zip Code
Ithaca NY 14850

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2238935

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary Chatham

Mailing Address 55 Crosby Street

City State Zip Code
New York NY 10012

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

Name of Employer self Occupation
artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2236854

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► **5365.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 562 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen T. Cheevers		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 55 W. Erie, # 2E		Transaction ID: 2238547	
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer cheevers&co inc	Occupation Stock Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Mr. John T. Childs, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address P.O. Box 940		Transaction ID: 2234307	
City State Zip Code South Salem NY 10590	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer IBM	Occupation Human Resources Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Marilee Chinnici-Zuercher		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 6043 Glenbarr Place		Transaction ID: 2234703	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer FIRSLINK	Occupation President/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

SUBTOTAL of Receipts This Page (optional) ▶	5585.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 563 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Leslie S. Christensen		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 9728 Swift Creek Court		Transaction ID: 2232295	
City State Zip Code Fairfax Station VA 22039		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Allfirst Trust Company Occupation Bank Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mrs. Bobbe Christopherson		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 876 Cottonwood Court		Transaction ID: 2239181	
City State Zip Code Lincoln CA 95648		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Photographer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Martha Ann Clark		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 3605 T Street NW		Transaction ID: 2232785	
City State Zip Code Washington DC 20007		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 564 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nena Clark		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4523 Maples Road		Transaction ID: 2238410	
City State Zip Code Fort Wayne IN 46816	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Carolyn Clarke		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 20051 Ocean Key Drive		Transaction ID: 2234414	
City State Zip Code Boca Raton FL 33498	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Sally W. Clayton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 10101 Governr Warfield Pkwy Apt. 424		Transaction ID: 2240579	
City State Zip Code Columbia MD 21044	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 565 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. James A. Clever		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 41 Glen Drive		Transaction ID: 2238703	
City State Zip Code Mill Valley CA 94941	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Ms. Mary M. Clifford		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 30907 Rue De La Pierre		Transaction ID: 2240620	
City State Zip Code Rancho Palos Verde CA 90275	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Doloris C. Cogan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 1616 N. Bay Drive		Transaction ID: 2235331	
City State Zip Code Elkhart IN 46514	Amount of Each Receipt this Period 33.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.00		

SUBTOTAL of Receipts This Page (optional) ▶	483.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 566 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dayl A Cohen

Mailing Address 241 Upland Road

City State Zip Code
Cambridge MA 02140

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

Name of Employer none Occupation STUDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2234413

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Lizabeth A Cohen

Mailing Address 232 Washington Street

City State Zip Code
Belmont MA 02478

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

Name of Employer Harvard University Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231361

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Phyllis J. Cohen

Mailing Address 6619 Mercer Street

City State Zip Code
Houston TX 77005

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

Name of Employer City of West University Occupation Council Member

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2240007

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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

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

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

FOR LINE NUMBER: PAGE 567 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Victoria A. Cohen

Mailing Address 1 Grove Isle Drive, Apt. 1205

City State Zip Code
Coconut Grove FL 33133

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: 2232443

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Denice M. Colazzo

Mailing Address 7 Lockwood Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2236125

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Ms. Sue L. Colburn

Mailing Address 236 N Water Street
4th Floor

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation
Achievements Unlimited SC Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2236517

Amount of Each Receipt this Period
85.00

SUBTOTAL of Receipts This Page (optional) ► 1170.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 568 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rhea S Collett		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 425 Dayton Towers Drive #2H		Transaction ID: 2236837	
City State Zip Code Dayton OH 45410	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Dayton VA Medical Center	Occupation medical transcriptionist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth L Colton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1848 Pine Street		Transaction ID: 2238785	
City State Zip Code San Francisco CA 94109	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Mr. Tom Congdon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 1510 E 10th Ave Apt 11W		Transaction ID: 2232766	
City State Zip Code Denver CO 80218	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer St. Mary Parish Land Co.	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	430.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 569 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Tom Congdon

Mailing Address 1510 E 10th Ave Apt 11W

City State Zip Code
Denver CO 80218

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

Name of Employer Occupation
St. Mary Parish Land Co. Executive

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2007

Transaction ID: 2240606

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Martha Conklin

Mailing Address 5527 Bear Creek Dr

City State Zip Code
Catheds Vly CA 95306

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

Name of Employer Occupation
U AZ Professor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2007

Transaction ID: 2231700

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Anthony S. Cookson

Mailing Address 1908 Thayer Avenue

City State Zip Code
Los Angeles CA 90025

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

Name of Employer Occupation
Self Writer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2007

Transaction ID: 2236173

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 570 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Angela Perry Cooley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 1314 W. Market Street		Transaction ID: 2233532	
City State Zip Code Crawfordsville IN 47933	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 500.00		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired		

Full Name (Last, First, Middle Initial) B. Ms. Jo Ann Corkran		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 340 West 22nd Street		Transaction ID: 2234411	
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 500.00		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation money Manager		

Full Name (Last, First, Middle Initial) C. Ms. Judith-Ann Corrente		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 61 East 80th St.		Transaction ID: 2239464	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 5000.00		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED		

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 571 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Amy Lee Corton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 1903 El Camino Del Teatro		Transaction ID: 2234427
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Planned Giving Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mrs. Mary A Coughlin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1700 36th St NW		Transaction ID: 2238806
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Edith B. Couturier		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 4700 Connecticut Avenue, NW Apartment 207		Transaction ID: 2240747
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 572 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rachel B Cowan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 285 Riverside Drive, # 10C		Transaction ID: 2233967
City State Zip Code New York NY 10025	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Institute for Jewish Spirituality	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Marilyn Cowger		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 7230 Bailey Road		Transaction ID: 2239271
City State Zip Code Clinton WA 98236	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Caroline Vivian Cox		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 620 Sand Hill Road Apt. 419D		Transaction ID: 2240535
City State Zip Code Palo Alto CA 94304	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 573 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anna L Crane		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 32 Wellfleet Bay		Transaction ID: 2238814	
City State Zip Code Alameda CA 94502		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Social Security Administration Occupation management analyst			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert L. Crane		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 5489 Steeplechase		Transaction ID: 2239773	
City State Zip Code Boca Raton FL 33496		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara B. Creed		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 1769 Forest View Avenue		Transaction ID: 2233230	
City State Zip Code Hillsborough CA 94010		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Trucker Huss Occupation Lawyer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 574 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Geraldine Cristol		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3840 Centenary Avenue		Transaction ID: 2239429	
City State Zip Code Dallas TX 75225	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Temple Emanu-el	Occupation Archivist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mr. Lawrence E. Crooks		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 5439 Sacramento Avenue		Transaction ID: 2234241	
City State Zip Code Richmond CA 94804	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Electrical Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) C. Ms. Amanda Cross		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1349 Bay Drive		Transaction ID: 2239354	
City State Zip Code Sanibel FL 33957	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CWC Software, Inc.	Occupation Software Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	6250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 575 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Judith E. Crowell		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 608 Altara Avenue		Transaction ID: 2235564
City State Zip Code Coral Gables FL 33146	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Advanced Dermatology Management	Occupation dermatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	

Full Name (Last, First, Middle Initial) B. Dr. Judith E. Crowell		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 608 Altara Avenue		Transaction ID: 2239509
City State Zip Code Coral Gables FL 33146	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Advanced Dermatology Management	Occupation dermatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	

Full Name (Last, First, Middle Initial) C. Mr. Pedro Cuatrecasas		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 7912 Entrada De Luz		Transaction ID: 2234369
City State Zip Code San Diego CA 92127	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	580.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 576 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cheryl S Cummer

Mailing Address 21 Fairfield Street, #4

City State Zip Code
Boston MA 02116

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1109.60

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2007

Transaction ID: 2231396

Amount of Each Receipt this Period
1109.60

[MEMO ITEM]
MEMO(STOCK)

B. Full Name (Last, First, Middle Initial)
Mrs. Thomas Cunningham

Mailing Address 9570 Mandus Olson Road NE

City State Zip Code
Bainbridge Is WA 98110

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 26 / 2007

Transaction ID: 2239729

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Jessica Curtis

Mailing Address 135 Corson Ave

City State Zip Code
Staten Island NY 10301

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

Name of Employer Occupation
VNSNY RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 26 / 2007

Transaction ID: 2239475

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 577 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Thomas R. Curtis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1903 Rolling Hills Avenue SE		Transaction ID: 2235169
City Renton State WA Zip Code 98055	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer State of Washington Occupation Social Worker	Aggregate Year-to-Date ▼ 340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Fern Dalby		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 4113 Buttrecup Lane NW		Transaction ID: 2238582
City Solway State MN Zip Code 56678	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Ellen L. Dale		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 16 Gardiner Court		Transaction ID: 2234399
City Orinda State CA Zip Code 94563	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 3800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2785.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 578 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Jo Anna Dale		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 704 N. Ponca Drive		Transaction ID: 2239298
City Independence State MO Zip Code 64056	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Ms. Judith Daniels		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address PO Box 928		Transaction ID: 2234419
City Union State ME Zip Code 04862	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Freelance Writer Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Ms. Gina M Danner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 4928 N Brooklyn		Transaction ID: 2233590
City Kansas City State MO Zip Code 64118	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Mail Print, Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CEO Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1550.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 579 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy D. Davidson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 400 E Pedregosa St Apt L		Transaction ID: 2240653	
City State Zip Code Santa Barbara CA 93103	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Mrs. Sheila K Davidson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 2150 Mission Ridge Rd.		Transaction ID: 2235842	
City State Zip Code Santa Barbara CA 92103	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) C. Ms. Jane L. Davis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 143 Inkberry Road		Transaction ID: 2232784	
City State Zip Code Hendersonville NC 28739	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	585.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 580 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathryn G. Davis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address PO Box 35		Transaction ID: 2233498	
City Mooresville	State AL	Zip Code 35649	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Department of Defense	Occupation Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. Richard Davis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1028 33rd Street, NW Suite 300		Transaction ID: 2237239	
City Washington	State DC	Zip Code 20007	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Dixon/Davis Media Group	Occupation media consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Ms. Suzanne Davis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 210 West 101st Street, Apt. 14		Transaction ID: 2236969	
City New York	State NY	Zip Code 10025	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Business owner/manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	2450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 581 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. William E. Davis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 503 E. Auduborn Drive		Transaction ID: 2238835
City State Zip Code Bloomington IN 47408	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Free Lancer	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Minnie Dean		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 112 2nd Street		Transaction ID: 2235073
City State Zip Code Radford VA 24141	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Ms. Alice M. Dear		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 400 W. 149th Street, Apt. 2		Transaction ID: 2234814
City State Zip Code New York NY 10031	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer A.M. Dear	Occupation Business Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 582 / 1028
	(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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Nancy B Dearman

Mailing Address 975 Memorial Drive, # 207

City State Zip Code
Cambridge MA 02138

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

Name of Employer Occupation
Kotter Associates Business Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2236976

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Jo Ann Delor

Mailing Address 7731 Reuter

City State Zip Code
Dearborn MI 48126

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238533

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Ms. Verda M. Deutscher

Mailing Address 4740 Connecticut Avenue, NW
#1007

City State Zip Code
Washington DC 20008

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231421

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 583 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Verda M. Deutscher

Mailing Address 4740 Connecticut Avenue, NW
#1007

City Washington State DC Zip Code 20008

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239904

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Virginia M Diamond

Mailing Address 4779 Gainsborough Dr

City Fairfax State VA Zip Code 22032

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

Name of Employer Diamond Insight (self employed) Occupation Consultant/Coach

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2236363

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Dr. A. Richard Diebold, Jr.

Mailing Address 2140 E. Third Street

City Tucson State AZ Zip Code 85719

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238665

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1185.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 584 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Catherine K. Dillingham		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 247 Barlow Rd.		Transaction ID: 2240366	
City State Zip Code Fairfield CT 06824		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Fairfield University Adjunct Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Ms. Diane T. Dodge		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 6407 32nd Street, NW		Transaction ID: 2233133	
City State Zip Code Washington DC 20015		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Teaching Strategies, Inc. Early Childhood Educator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Ms. Carol Dollinger		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 40 Pear Court		Transaction ID: 2234433	
City State Zip Code Hillsborough CA 94010		Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 585 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Catherine J. Douglass		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1056 5th Avenue # 19C		Transaction ID: 2240745
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Network for Women's Services	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Vesta S. Downer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 509 Hillwood Avenue		Transaction ID: 2233932
City State Zip Code Falls Church VA 22042	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) C. Ms. Shelly Drasin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 76 Silverwood Drive		Transaction ID: 2233124
City State Zip Code Lafayette CA 94549	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer RPM Mortgage	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 586 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Margie Dubrow		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 740 Wolcott Drive		Transaction ID: 2240599	
City Philadelphia	State PA	Zip Code 19118	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Jeanie Duck		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 13637 Deering Bay Drive Apt 272		Transaction ID: 2238293	
City Coral Gables	State FL	Zip Code 33158	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Boston Consulting Group		Occupation mgmt. consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Marjorie M. Dumanois		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 6580 Lake Shore Road		Transaction ID: 2233610	
City Manistee	State MI	Zip Code 49660	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 587 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Davis Dunham		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 7505 Chestnut Hill Dr		Transaction ID: 2240391	
City Prospect	State KY	Zip Code 40059	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Isabel P. Dunst		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 4841 Bayard Blvd		Transaction ID: 2233512	
City Bethesda	State MD	Zip Code 20816	Amount of Each Receipt this Period 900.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hogan and Harston		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. Ms. Carol A Durham		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 5719 Bell Tower Lane		Transaction ID: 2239965	
City Fort Wayne	State IN	Zip Code 46815	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 588 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cynthia Dusel-Bacon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 139 Princeton Rd		Transaction ID: 2232535
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer US Geological Survey	Occupation geologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mrs. Bettina Baig Duval		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 220 23rd Street		Transaction ID: 2233944
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The California List	Occupation Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara S Earnest		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 6 Forest Dale Dr		Transaction ID: 2234525
City State Zip Code Morristown NJ 07960	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional) ▶	530.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 589 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Jean A. Ebbert		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 9046 Belvoir Woods		Transaction ID: 2234713
City State Zip Code Fort Belvoir VA 22060	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self Occupation writer/editor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. Prof. Diana L. Eck		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 50 Holyoke Street		Transaction ID: 2232787
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Harvard University Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Frances M. Edwards		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 50 Concord Park East		Transaction ID: 2233828
City State Zip Code Nashville TN 37205	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Advance Practice Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional) ▶	525.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 590 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Pauline M. Edwards-Delaney		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4718 Hallmark Drive, # 351		Transaction ID: 2238583	
City State Zip Code Houston TX 77056	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Karen Ehrhorn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 254 Kaha Street		Transaction ID: 2239446	
City State Zip Code Kailua HI 96734	Amount of Each Receipt this Period 210.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Risa H. Ehrlich		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 116 Pinehurst Avenue Apt. G34		Transaction ID: 2232220	
City State Zip Code New York NY 10033	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self-employed Artist	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	560.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 591 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Julie Eichenberger

Mailing Address 293 Sea Cliff Avenue Apt. 7

City State Zip Code
Sea Cliff NY 11579

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2234434

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Julie Eichenberger

Mailing Address 293 Sea Cliff Avenue Apt. 7

City State Zip Code
Sea Cliff NY 11579

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238734

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard Eisen

Mailing Address 7415 Cedar Avenue

City State Zip Code
Takoma Park MD 20912

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 0 7

Transaction ID: 2233846

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 592 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Judith Laikin Elkin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3 Southwick Court		Transaction ID: 2239427	
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Dr. Judith Laikin Elkin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 3 Southwick Court		Transaction ID: 2239462	
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Connie Ellerbach		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7	
Mailing Address 880 Sea Island Lane		Transaction ID: 2231459	
City State Zip Code Foster City CA 94404	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Fenwick & West LLP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 593 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Willard H. Elsbee		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 209 Grosvenor Street		Transaction ID: 2236984	
City Athens	State OH	Zip Code 45701	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. George M. Elsener		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 730 S. Beverly Lane		Transaction ID: 2239265	
City Arlington Hts	State IL	Zip Code 60005	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth S. English		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1 Island Drive, Unit 20		Transaction ID: 2234378	
City Norwalk	State CT	Zip Code 06855	Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Volunteer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 594 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. S. Osborn O. Erickson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 501 2nd Street Suite 212		Transaction ID: 2238755	
City State Zip Code San Francisco CA 94107		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Developer		Occupation Emerald Fund Inc.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Sally C. Ericsson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 7	
Mailing Address 1805 Monroe Street, NW		Transaction ID: 2232379	
City State Zip Code Washington DC 20010		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) C. Ms. Stephanie L. Ertel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 624 Wheless Ave		Transaction ID: 2232799	
City State Zip Code Kerrville TX 78028		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Richard R. Ertel, P.C.		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1450.00	

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 595 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Maxene P. Eubanks

Mailing Address 13023 W Butterfield Drive

City State Zip Code
Sun City West AZ 85375

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2241581

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Todd Evans

Mailing Address 2086 East Lake Road

City State Zip Code
Atlanta GA 30307

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

Name of Employer Occupation
Self Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2238780

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Margaret B Ewalt

Mailing Address 1312 Cottonwod Trail

City State Zip Code
Sarasota FL 34232

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2236849

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► **5090.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 596 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Margaret B Ewalt

Mailing Address 1312 Cottonwod Trail

City State Zip Code
Sarasota FL 34232

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239974

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Ms. Patricia Fallon

Mailing Address 50 Woodbury Street

City State Zip Code
South Hamilton MA 01982

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2235663

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Ms. Patricia P. Fearey

Mailing Address 1809 7th Avenue Ste 111

City State Zip Code
Seattle WA 98101

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

Name of Employer Occupation
The Feary Group PR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2237898

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	345.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 597 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sara Fein		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 5818 Dawes Avenue		Transaction ID: 2232593
City State Zip Code Alexandria VA 22311	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Food & Drug Administration	Occupation Consumer Science Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Frayda Feldman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 4 Helena Drive		Transaction ID: 2239117
City State Zip Code Chappaqua NY 10514	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ronald Feldman Fine Arts	Occupation Co-Dir, Art Gallery	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Karen M. Feldman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 38 Pleasantview Drive		Transaction ID: 2233950
City State Zip Code Hudson NY 12534	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Attorney-Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 598 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

<p>A. Full Name (Last, First, Middle Initial) Dr. Diane Fellows</p> <p>Mailing Address 7031 Corte Laguna</p> <p>City State Zip Code Rancho Santa Fe CA 92091</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2007</p> <p>Transaction ID: 2233591</p> <p>Amount of Each Receipt this Period 250.00</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Dr. Joan M Ferrante</p> <p>Mailing Address 440 Riverside Drive # 91</p> <p>City State Zip Code New York NY 10027</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007</p> <p>Transaction ID: 2234522</p> <p>Amount of Each Receipt this Period 20.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Dr. Joan M Ferrante</p> <p>Mailing Address 440 Riverside Drive # 91</p> <p>City State Zip Code New York NY 10027</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007</p> <p>Transaction ID: 2239494</p> <p>Amount of Each Receipt this Period 100.00</p>
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SUBTOTAL of Receipts This Page (optional)	370.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 599 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Donn Fichter		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 50 Parkwood Street		Transaction ID: 2234183	
City Albany State NY Zip Code 12208		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1450.00	

B. Full Name (Last, First, Middle Initial) Mr. Donn Fichter		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 50 Parkwood Street		Transaction ID: 2237324	
City Albany State NY Zip Code 12208		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1450.00	

C. Full Name (Last, First, Middle Initial) Mr. Donn Fichter		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 50 Parkwood Street		Transaction ID: 2239325	
City Albany State NY Zip Code 12208		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1450.00	

SUBTOTAL of Receipts This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 600 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nydia Finch		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 13801 York Road, # J10		Transaction ID: 2238747	
City State Zip Code Cockeysville MD 21030	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Mr. John S. Fine		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 2324 Madison Road, Apt. 809		Transaction ID: 2238570	
City State Zip Code Cincinnati OH 45208	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mr. Coleman Finkel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 2600 Netherland Avenue Apt 702		Transaction ID: 2232218	
City State Zip Code Riverdale NY 10463	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consultant Aggregate Year-to-Date ▼ 450.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 601 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Coleman Finkel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 2600 Netherland Avenue Apt 702		Transaction ID: 2239009
City State Zip Code Riverdale NY 10463	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B. Full Name (Last, First, Middle Initial) Mr. Peter Finnican		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 305 Indian Rock Road		Transaction ID: 2240577
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ms. Audrey A. Fisch		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 421 Highland Avenue		Transaction ID: 2234028
City State Zip Code Westfield NJ 07090	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer New Jersey City University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 602 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lauri J. Fitz-Pegado		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 3401 38TH St NW Apt 309		Transaction ID: 2232160	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Iridium	Occupation Telecom		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Susan Flaherty		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 3211 Crestmoor Drive		Transaction ID: 2238471	
City State Zip Code Woodbury MN 55125	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Susan Flaherty		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 3211 Crestmoor Drive		Transaction ID: 2240612	
City State Zip Code Woodbury MN 55125	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 603 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marian W. Fleming		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 1120 Texas Street # 6A		Transaction ID: 2231742
City State Zip Code Houston TX 77002	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Tree Farmer	Aggregate Year-to-Date ▼ 1300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Nancy J Flint		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1857 NW 93 Way		Transaction ID: 2236744
City State Zip Code Plantation FL 33322	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Hunton & Williams LLP Occupation Attorney	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Gonzalee Ford		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 555 Banyan Treet # 205		Transaction ID: 2232566
City State Zip Code Del Ray Beach FL 33483	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Antique Dealer	Aggregate Year-to-Date ▼ 1300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	675.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 604 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laura D Ford		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 295 Red Tail Trail		Transaction ID: 2234861	
City State Zip Code Evergreen CO 80439	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2050.00		

Full Name (Last, First, Middle Initial) B. Ms. Jan L. Forney		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 607 Kipling		Transaction ID: 2240351	
City State Zip Code Houston TX 77006	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Geophysicist Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mrs. Alyne Fortgang		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 7	
Mailing Address 10011 Vinton CT. NW		Transaction ID: 2234119	
City State Zip Code Seattle WA 98177	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 605 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sandy Fortier		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 3265 North Maple Road		Transaction ID: 2231947	
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 1300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Psychotherapist	Aggregate Year-to-Date ▼ 2300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Stephenie Foster		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3017 Dent Pl., NW		Transaction ID: 2240860	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Georgetown Strategies Occupation Attorney	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Anne Connerley Fowler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 422 N. Willow Street		Transaction ID: 2239771	
City State Zip Code Harrison AR 72601	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 606 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Terry W. Francis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 23 Foreman Drive		Transaction ID: 2235347	
City State Zip Code Glen Carbon IL 62034	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 340.00		

B. Full Name (Last, First, Middle Initial) Ms. Deborah Franczek		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 5555 Everett # 7D		Transaction ID: 2238539	
City State Zip Code Chicago IL 60637	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Ms. Myrna R. Frankel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 214 Spruce Street		Transaction ID: 2239164	
City State Zip Code San Francisco CA 94118	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychoanalyst Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2085.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 607 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bunny Freidus		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address PO Box 3131		Transaction ID: 2239175
City State Zip Code Telluride CO 81435	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. Druscilla French		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 837 Mackall Avenue		Transaction ID: 2239103
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Foundaiton for Mythologic- al Stud Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Exec. Director Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda Friedman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 7 Gracie Square		Transaction ID: 2239496
City State Zip Code Nw York NY 10028	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 608 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert G. Friese		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1299 SW Briarwood Drive		Transaction ID: 2238731	
City State Zip Code Port Saint Lucie FL 34986	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Carolyn Fromuth		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2490 N Park Rd Apt 216		Transaction ID: 2239336	
City State Zip Code Hollywood FL 33021	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. Ms. Patti L. Fry		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1045 Wallea Drive		Transaction ID: 2233952	
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 609 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Kyle I. Fuchs		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1620 NW Walmer Drive		Transaction ID: 2239093	
City State Zip Code Portland OR 97229	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Nancy Fuller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 6560 Itchy Acres Road		Transaction ID: 2238540	
City State Zip Code Granite Bay CA 95746	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation State Park Ranger	Aggregate Year-to-Date ▼ 1200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Dot Furness		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 120 Borden Road		Transaction ID: 2237011	
City State Zip Code Middletown NJ 07748	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 610 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mikki Futernick

Mailing Address 2 Grove Isle Drive, Apt. 1509

City State Zip Code
Miami FL 33133

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

Name of Employer Self Occupation Campaign Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238577

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Joyce Gad

Mailing Address 102 Woodtrail Lane

City State Zip Code
Cary NC 27518

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: 2240121

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Shatzi W. Gaines

Mailing Address 750 Ocean Royale Way Apt. 1101

City State Zip Code
Juno Beach FL 33408

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2239392

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 611 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sarah Galbraith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 3438 Old Yorktown Road		Transaction ID: 2240028	
City Yorktown Hts	State NY	Zip Code 10598	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Sandra L. Galejs		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 11 Moon Hill Road		Transaction ID: 2238390	
City Lexington	State MA	Zip Code 02421	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Monstyre Imaging	Occupation Engineering		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Marjorie Galenson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 55 Grasslands Road Apt. B229		Transaction ID: 2239421	
City Valhalla	State NY	Zip Code 10595	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 612 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Nancy Gallant		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 8380 40th Avenue North		Transaction ID: 2233228	
City State Zip Code Saint Petersburg FL 33709	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Psychotherapist	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Gisela H. Gamper		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 491 Broadway, #3		Transaction ID: 2239516	
City State Zip Code New York NY 10012	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation artist	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Jan E. Gardner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 3 Ponderosa Lane		Transaction ID: 2240757	
City State Zip Code Rolling Hills Est. CA 90274	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 613 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Barbara Friedson Garrett		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 301 Casuarina Concourse		Transaction ID: 2238271	
City State Zip Code Coral Gables FL 33143		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Windmere Corporation Executive VP for Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary A. Gaskill		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 509 E 4th Street		Transaction ID: 2232359	
City State Zip Code Ottumwa IA 52501		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Iowa General Assembly State Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Judith L. Gass		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 1265 Beacon Street # 406		Transaction ID: 2231707	
City State Zip Code Brookline MA 02446		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	2950.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 614 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gretchen S. Geller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 3 Glenlawn Ct		Transaction ID: 2237241	
City State Zip Code Sea Cliff NY 11579		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Artist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary Jane Gentry		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 680 Eaton Street		Transaction ID: 2231688	
City State Zip Code Memphis TN 38120		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Carol Georgopoulos		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 1125 Cuatro Cerros Trail SE		Transaction ID: 2231929	
City State Zip Code Albuquerque NM 87123		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 615 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Janice Roosevelt Gerard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 12021 Wilshire Blvd., #537		Transaction ID: 2238256	
City State Zip Code Los Angeles CA 90025	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychologist Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Nona Ghent		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 57 Norman Court		Transaction ID: 2240539	
City State Zip Code Walnut Creek CA 94595	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Westaff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. Ms. Nona Ghent		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 57 Norman Court		Transaction ID: 2240644	
City State Zip Code Walnut Creek CA 94595	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Westaff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ 450.00		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 616 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Edes P. Gilbert		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 175 East 79th Street		Transaction ID: 2234422	
City State Zip Code New York NY 10021		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Independent Educational Services		Occupation Educational Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ms. Ethel S. Gilbert		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 6 Celmson Court		Transaction ID: 2233525	
City State Zip Code Rockville MD 20850		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer NIH		Occupation Biostatistician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. John J. Gilman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2852 Forrester Drive		Transaction ID: 2239293	
City State Zip Code Los Angeles CA 90064		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer UCLA		Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	2850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 617 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Karen Gilmore		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 305 East 18 Street		Transaction ID: 2234768	
City State Zip Code New York NY 10003	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychiatrist Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Laura Ginger		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 2983 Ramble Road West		Transaction ID: 2234512	
City State Zip Code Bloomington IN 47408	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Indiana University Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Professor Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) C. Ms. Carol Gjelsvik		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 30 Cecil Avenue		Transaction ID: 2238657	
City State Zip Code N. Kingstown RI 02852	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	395.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 618 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan D. Glatthorn, Esq.		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 6331 Camino de la Costa		Transaction ID: 2240394	
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Attorney	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Shirley Gleich		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 8116 Pine Circle		Transaction ID: 2238666	
City State Zip Code Tamarac FL 33321	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Glenn		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1108 Cowards Creek Drive		Transaction ID: 2237012	
City State Zip Code Friendswood TX 77546	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Housewife	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 619 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. E. Glennon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1704 Putter Lane		Transaction ID: 2239386	
City State Zip Code Reston VA 20190	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Lawyer	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Judith Gluckstern		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 54 Thompson Street		Transaction ID: 2233235	
City State Zip Code New York NY 10012	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Linda Gochfeld		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 133 Meadow Brook Drive		Transaction ID: 2232126	
City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SERV Behavioral Health Occupation Psychiatrist	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 620 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janice L. Goldblum		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007
Mailing Address 10501 Wilshire Blvd. Unit 701		Transaction ID: 2240446
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Lee Golden		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007
Mailing Address 8 Birdsall Farm Drive		Transaction ID: 2240248
City State Zip Code Armonk NY 10504	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Morton Goldfein		Date of Receipt M M / D D / Y Y Y Y 04 / 12 / 2007
Mailing Address 50 East 89th Street		Transaction ID: 2233011
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 1300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1650.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: PAGE 621 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Jane B. Goldman

Mailing Address 139 East 94th Street

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239948

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Marcia C. Goldstein

Mailing Address 220 Central Park S.

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
Ellenbogen & Goldstein Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: 2240375

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Gary L. Goltra

Mailing Address 10414 Stonebank Street

City State Zip Code
Bellflower CA 90706

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

Name of Employer Occupation
Self Building Inspector

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2236655

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 622 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Gary L. Goltra		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 10414 Stonebank Street		Transaction ID: 2238759
City State Zip Code Bellflower CA 90706	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Building Inspector Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary L. Good		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 13824 Rivercrest Drive		Transaction ID: 2233319
City State Zip Code Little Rock AR 72212	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Un of Arkansas at Little Rock Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Professor Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Dr. Shelley S. Gordon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 300 N State Street #3434		Transaction ID: 2239264
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation management consultant Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 623 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan G. Gordon

Mailing Address 3 Cooper Morris Drive

City Pomona State NY Zip Code 10970

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2007

Transaction ID: 2234825

Amount of Each Receipt this Period
85.00

B. Full Name (Last, First, Middle Initial)
Ms. Carol Gown

Mailing Address 2637 11th Avenue E

City Seattle State WA Zip Code 98102

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2007

Transaction ID: 2232682

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Jan Graham

Mailing Address 4899 Montrose Blvd. Apt. 1614

City Houston State TX Zip Code 77006

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

Name of Employer Self Occupation Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
MM / DD / YYYY
04 / 02 / 2007

Transaction ID: 2231452

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1335.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 624 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Alvin L. Gray		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 15 Fairway Trail		Transaction ID: 2233002	
City State Zip Code Moreland Hills OH 44022		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Investor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Ms. Sylvia E. Green		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 16 Harcourt St. #7G		Transaction ID: 2239368	
City State Zip Code Boston MA 02116		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Ms. Marion E. Greene		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 945 Green St # 9		Transaction ID: 2233221	
City State Zip Code San Francisco CA 94133		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer LEF Foundation Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 625 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sally Greenspan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address 139 West 19th Street Apt. 5NE		Transaction ID: 2231550
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mrs. Mary W Greenwald		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 10577 Drexton Place		Transaction ID: 2238808
City State Zip Code Newburgh IN 47630	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Greenwood		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 486 N State St		Transaction ID: 2234716
City State Zip Code Concord NH 03301	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer Nancy Greenwood Smith Insurance	Occupation Insurance Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)	485.00
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 626 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Evelyn Langlieb Greer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2400 S. Dixie Hwy.		Transaction ID: 2239310	
City State Zip Code Miami FL 33133		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Evelyn Langlieb Greer, P.-A.		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. William Greer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 4320 SW Crestwood Drive		Transaction ID: 2239731	
City State Zip Code Portland OR 97225		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Maryann I Gregory		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1429 N. Dearborn # 4N		Transaction ID: 2233988	
City State Zip Code Chicago IL 60610		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer self		Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 627 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara D. Greiss		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 518 Stonemarket Road		Transaction ID: 2232128
City State Zip Code Mooresville NC 28117	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ms. Sara E. Griffith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address PO Box 791 Lantern Cottage Shady Lane		Transaction ID: 2240657
City State Zip Code Hot Springs VA 24445	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Grosfeld		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 420 Martell Drive		Transaction ID: 2233108
City State Zip Code Bloomfield Hills MI 48304	Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional) ▶	3150.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 628 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Patrick S. Guillen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 2002 Magnolia Avenue		Transaction ID: 2241200
City State Zip Code Ontario CA 91762	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Librerian Del Pueblo Inc	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) B. Ms. Carolyn K. Gusmer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 122 Shadow Lake Drive		Transaction ID: 2237508
City State Zip Code Waupaca WI 54981	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Claire Gutekunst		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 316 W. 84th Street Apt. 4D		Transaction ID: 2233132
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Proskauer Rosé LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1300.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 629 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Nancy E. Hall

Mailing Address 1632 Camden Avenue
Apt. 304

City State Zip Code
Los Angeles CA 90025

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

Name of Employer Occupation
UCLA Medical Center Social Worker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238675

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Deborah Halliday

Mailing Address PO Box 1522

City State Zip Code
Rancho Santa Fe CA 92067

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

Name of Employer Occupation
Westoves Mgt. VP

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: 2240331

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Roslyn W Halpern

Mailing Address 7546 SW Aloma Way # 1

City State Zip Code
Portland OR 97223

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

Name of Employer Occupation
self ecommerce

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2236835

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **530.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 630 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Roslyn W Halpern		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address 7546 SW Aloma Way # 1		Transaction ID: 2233808	
City State Zip Code Portland OR 97223		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation self ecommerce			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Ms. Roslyn W Halpern		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 7546 SW Aloma Way # 1		Transaction ID: 2234089	
City State Zip Code Portland OR 97223		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation self ecommerce			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ms. Roslyn W Halpern		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 7546 SW Aloma Way # 1		Transaction ID: 2234088	
City State Zip Code Portland OR 97223		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation self ecommerce			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	130.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 631 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Stephen Halpert		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 8004 S.W. 102nd Street		Transaction ID: 2234600
City State Zip Code Miami FL 33156	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician	
Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. Mr. Stephen Halpert		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 8004 S.W. 102nd Street		Transaction ID: 2240763
City State Zip Code Miami FL 33156	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician	
Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. Ms. Ellen L Hamilton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 3101 Berry Ct.		Transaction ID: 2233968
City State Zip Code Crystal Lake IL 60012	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 632 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy M. Hamilton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 525 S. Burdick Street Apt. 3804		Transaction ID: 2233848
City Kalamazoo	State MI Zip Code 49007	
Amount of Each Receipt this Period 2500.00		Aggregate Year-to-Date ▼ 2500.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Lorraine W. Hancock		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 147 Mapache Drive		Transaction ID: 2231740
City Portola Valley	State CA Zip Code 94028	
Amount of Each Receipt this Period 1000.00		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer self	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sarah Hancock		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 31 Summit Rd		Transaction ID: 2231752
City Belmont	State MA Zip Code 02478	
Amount of Each Receipt this Period 1000.00		Aggregate Year-to-Date ▼ 850.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 633 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia W. Hanson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 4276 Sanctuary Way		Transaction ID: 2233243	
City State Zip Code Bonita Springs FL 34134	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dr. Eleanor E. Harris		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 7	
Mailing Address 15404 Fenton Place		Transaction ID: 2232454	
City State Zip Code Tampa FL 33647	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Physician	Aggregate Year-to-Date ▼ 1300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Eleanor E. Harris		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 7	
Mailing Address 15404 Fenton Place		Transaction ID: 2232453	
City State Zip Code Tampa FL 33647	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Physician	Aggregate Year-to-Date ▼ 1300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 634 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Johanna A. Harris		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 665 Concord Avenue		Transaction ID: 2238349
City Belmont State MA Zip Code 02478	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Janet R. Harrison		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 1905 Newman Place		Transaction ID: 2232419
City Mountain View State CA Zip Code 94043	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Program Manager Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Janet R. Harrison		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 1905 Newman Place		Transaction ID: 2240466
City Mountain View State CA Zip Code 94043	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Program Manager Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 635 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane B. Hart		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 18584 Lancashire Way		Transaction ID: 2233509	
City State Zip Code San Diego CA 92128	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mrs. Linda J Hart		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 7990 SW 117th Avenue #134		Transaction ID: 2231931	
City State Zip Code Miami FL 33183	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation HQDL, INC FORENSIC EXAMINER	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Hollister Hartman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 7708 Random Run Ln		Transaction ID: 2235216	
City State Zip Code Falls Church VA 22042	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation VDO Car Communication Engineer	Aggregate Year-to-Date ▼ 340.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1335.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 636 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Anne Haugh

Mailing Address 4960 Crystal Drive

City State Zip Code
San Diego CA 92109

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238365

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. David Hayes

Mailing Address 740 Ocean Avenue

City State Zip Code
New London CT 06320

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 2233112

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Hayes

Mailing Address 130 South 13th East #801

City State Zip Code
Salt Lake City UT 84102

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238542

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

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

FOR LINE NUMBER: PAGE 637 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Britt Hedman

Mailing Address 110 Peter Coutts Circle

City State Zip Code
Stanford CA 94305

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

Name of Employer Occupation
Stanford University Doctor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 2233071

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 367

City State Zip Code
Bonita Springs FL 34133

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 2233570

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Jean D. Hellmuth

Mailing Address 3939 Walnut Avenue #187

City State Zip Code
Carmichael CA 95608

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 3 / 2 0 0 7

Transaction ID: 2231548

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 638 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mitzi G. Henderson

Mailing Address 16 Sunset Lane

City State Zip Code
Menlo Park CA 94025

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237319

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Barbara Henry

Mailing Address 6947 Coal Creek Parkway SE Ste. 212

City State Zip Code
Newcastle WA 98059

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

Name of Employer Occupation
Self Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231423

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Ms. Doreen Hermelin

Mailing Address 31500 Bingham Road

City State Zip Code
Bingham Farms MI 48025

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

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231413

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 639 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jennings S. Heywood		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 19103 Hollow Lane		Transaction ID: 2232746
City State Zip Code Redding CA 96003	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer USDA	Occupation supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Caroline Hicks		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 2150 Waverley St		Transaction ID: 2234418
City State Zip Code Palo Alto CA 94301	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation HOUSEWIFE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Jutta Hicks		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 130 Mount Vernon Street		Transaction ID: 2237240
City State Zip Code Boston MA 02108	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 640 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nance Hikes		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 3 / 2 0 0 7	
Mailing Address 143 Westbridge		Transaction ID: 2231538	
City State Zip Code Berea OH 44017	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Housewife Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Dr. Eugene A. Hildreth		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 2000 Cambridge Avenue Apt. 129		Transaction ID: 2236979	
City State Zip Code Wyomissing PA 19610	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Ms. Debbie L. Hill		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 800 Eastowne Drive Suite 106		Transaction ID: 2232719	
City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychotherapist Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 641 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Harriet Hill

Mailing Address PO Box 2036

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239853

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Ms. Michal Hillman

Mailing Address 2898 Sequoyah Drive, NW

City Atlanta State GA Zip Code 30327

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

Name of Employer Self Occupation Community Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239990

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Dorothy S. Hines

Mailing Address 23 Wheaton Way

City Water Mill State NY Zip Code 11976

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

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 0 7

Transaction ID: 2233812

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 642 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. George A. Hisert		Date of Receipt M M / D D / Y Y Y Y 04 / 20 / 2007	
Mailing Address 454 Cragmont Avenue		Transaction ID: 2237033	
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Brobeck, Phleger & Harris	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Mrs. Ruth Hoberman		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2007	
Mailing Address 220 Riverside Blvd Apt 11M		Transaction ID: 2238185	
City State Zip Code New York NY 10069	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Jean Hoffman		Date of Receipt M M / D D / Y Y Y Y 04 / 20 / 2007	
Mailing Address 120 Island Avenue		Transaction ID: 2234239	
City State Zip Code Peaks Island ME 04108	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 643 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jo Hoffman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1913 NW Quail Trail		Transaction ID: 2238244	
City State Zip Code Lees Summit MO 64081		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Ms. Janet Hofmann		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 3889 Harvest Drive		Transaction ID: 2231842	
City State Zip Code Redwood City CA 94061		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ms. Janet Hofmann		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 3889 Harvest Drive		Transaction ID: 2239863	
City State Zip Code Redwood City CA 94061		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1125.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 644 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Karen O Hofmeister

Mailing Address 2121 Kirby Drive
No 97

City State Zip Code
Houston TX 77019

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

Name of Employer Self Occupation author

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232440

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mrs. Ann Hogle

Mailing Address 45 Upper Lake Road

City State Zip Code
Woodside CA 94062

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239740

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Susan Holcombe

Mailing Address 663 Green Street

City State Zip Code
Cambridge MA 02139

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

Name of Employer Brandeis Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240616

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 645 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Sally H. Hollaman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 7 Riverwoods Drive Unit P219		Transaction ID: 2231786
City Exeter State NH Zip Code 03833	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Lori S Holman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 63 Castle Park Way		Transaction ID: 2233144
City Oakland State CA Zip Code 94611	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Hoover		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 8226 N Painted Feat		Transaction ID: 2232878
City Tucson State AZ Zip Code 85743	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Fair Isaac Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director Strategic Planning Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 646 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kae Hopkins		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 4208 West Wernett Road		Transaction ID: 2232400	
City State Zip Code Pasco WA 99301	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mrs. Winifred M. Hoppert		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 815 12th Street		Transaction ID: 2232835	
City State Zip Code Windom MN 56101	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mrs. Natalie Horwitz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 77 Middle Rd # 260		Transaction ID: 2234320	
City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 647 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Hoskins		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 5403 Rodgers Avenue		Transaction ID: 2239234	
City State Zip Code Harrisburg PA 17112	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. George Howard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address 22814 Stronghurst Avenue		Transaction ID: 2233678	
City State Zip Code Bellrs Manor NY 11427	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Julie R Howell		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 1414 22nd St., NW #56		Transaction ID: 2231946	
City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Health care consultant	Aggregate Year-to-Date ▼ 1300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 648 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Megan K Hull

Mailing Address 2226 Hall Pl. NW

City State Zip Code
Washington DC 20007

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

Name of Employer Self Occupation
Self consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2238319

Amount of Each Receipt this Period
1300.00

B. Full Name (Last, First, Middle Initial)
Ms. Diane Hullet

Mailing Address 792 14th Street

City State Zip Code
Boulder CO 80302

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

Name of Employer Self Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233329

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Elinor Green Hunter

Mailing Address 4205 Military Road NW

City State Zip Code
Washington DC 20015

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240824

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	2550.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 649 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Hunter		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 6 Wampatuck Road North		Transaction ID: 2233551
City State Zip Code Dedham MA 02026	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Ms. Kathryn M. Igoe		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 4620 N Park Avenue Apt. 1109E		Transaction ID: 2239914
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Am. Assoc. Of Museums Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Georgia W Inglis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address P.O. Box 462 5045 H-H-R Ranch Road		Transaction ID: 2239468
City State Zip Code Wilson WY 83014	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	5350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 650 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lesley L. Israel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address P.O. Box 69 Snug Harbor Farm		Transaction ID: 2239834	
City State Zip Code Royal Oak MD 21662		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Mr. Jon A Jaffe		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 7	
Mailing Address 911 Yakima Ave. S		Transaction ID: 2234022	
City State Zip Code Seattle WA 98144		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Microsoft Program Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Cornelia D. Jahncke		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 125 W. Lyon Farm Drive		Transaction ID: 2236935	
City State Zip Code Greenwich CT 06831		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	1450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 651 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Karen S. Jakes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 520 East 86th Street Apt. 13-C		Transaction ID: 2231956
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Albert Einstein College of Medicine	Occupation Biologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Marjorie E James		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 14416 Tanglewood Dr.		Transaction ID: 2231732
City State Zip Code Farmers Branch TX 75234	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Mrs. Amy W. Jaynes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 7414 Sun Point Lane		Transaction ID: 2233236
City State Zip Code Sacramento CA 95828	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 652 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sheila Jefferson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 10634 Holman Avenue, # 4		Transaction ID: 2239969	
City State Zip Code Los Angeles CA 90024		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Hookstratten & Hookstratten Business Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Ms. Robin Jeffries		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 2569 Webster		Transaction ID: 2240411	
City State Zip Code Palo Alto CA 94301		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Google User interface designer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Frances A. Jensen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 1888 South Obenchain Road		Transaction ID: 2240176	
City State Zip Code Eagle Point OR 97524		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 653 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marla D Jensen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1615 Bittern Court		Transaction ID: 2233987	
City State Zip Code Carlsbad CA 92011		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

B. Full Name (Last, First, Middle Initial) Ms. Peggy Jensen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 1710 Beach Street		Transaction ID: 2231388	
City State Zip Code Muskegon MI 49441		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ms. Cynthia O Jimenez		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 932 Franklin Street		Transaction ID: 2232265	
City State Zip Code Wyomissing PA 19610		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 654 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Daniel F Johnson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 3652 Tamarack Lane		Transaction ID: 2234050
City State Zip Code Eau Claire WI 54701	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary Ellen Johnson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 1040 5th Avenue, Apt. 5A		Transaction ID: 2232386
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Ellen Johnson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1040 5th Avenue, Apt. 5A		Transaction ID: 2238784
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 4100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	4650.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 655 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ann R. Jones

Mailing Address 1N N Leverett Road

City State Zip Code
Montague MA 01351

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

Name of Employer Occupation
Smith College Professor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	0	/	2	0	0	7

Transaction ID: 2232676

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Jones

Mailing Address 12 Drake Ln

City State Zip Code
Scarborough ME 04074

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	0	7

Transaction ID: 2233234

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Miriam C. Jones

Mailing Address 173 Morning Pointe Lane

City State Zip Code
Athens TN 37303

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	7

Transaction ID: 2239281

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 656 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Nancy Brooks Jones		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 536 Nash Street		Transaction ID: 2239168	
City State Zip Code Rocky Mount NC 27804	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Susan Jones		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 47-682 7 Hui Kelu		Transaction ID: 2233111	
City State Zip Code Kaneohe HI 96744	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Non-profit Consultant Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) C. Ms. Luana Josvold		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address P.O. Box 100		Transaction ID: 2237067	
City State Zip Code Mattapoisett MA 02739	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Musician Translator Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 657 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Jourdan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 2140 Santa Cruz Ave., # E202		Transaction ID: 2234072
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Sally Juday		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 1833 Ridgecrest Road		Transaction ID: 2238245
City State Zip Code Fort Collins CO 80524	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Judy M. Judd		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address 1241 Island Drive, Apt. 101		Transaction ID: 2231549
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2350.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 658 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Linda P Judd		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 156 Sylvan Rd.		Transaction ID: 2234087	
City Walnut Creek	State CA	Zip Code 94596	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Ms. Claudia B Kadis		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 4143 Gardenlake Drive		Transaction ID: 2232105	
City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mrs. Julia G. Kahl		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 98 Fisher Eddy Rd		Transaction ID: 2233110	
City Arrowsic	State ME	Zip Code 04530	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	785.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 659 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Glad Kaletta		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 4730 W 77th Street		Transaction ID: 2234950	
City State Zip Code Prairie Vlg KS 66208	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 400.00		

B. Full Name (Last, First, Middle Initial) Ms. Ellin Kalmus		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 125 E. 72nd Street		Transaction ID: 2239933	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Art Historian Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) Ms. Elaine Kant		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 7600 Valley Dale Drive		Transaction ID: 2232556	
City State Zip Code Austin TX 78731	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Computer Scientist Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 660 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marcia Simon Kaplan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 3809 Anderson Road		Transaction ID: 2240186	
City State Zip Code Coral Gables FL 33134	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Sharon Karmazin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address 18 Upper Brook Drive		Transaction ID: 2233769	
City State Zip Code North Brunswick NJ 08902	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Marvin Karno		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 4836 Oak Park Avenue		Transaction ID: 2234440	
City State Zip Code Encino CA 91316	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 661 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Julane L. Katz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 7300 Dearwester Dr Unit 124		Transaction ID: 2240461	
City State Zip Code Cincinnati OH 45236	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Yukako Kawata		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 5 Riverside Drive, PH-A		Transaction ID: 2231424	
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lawyer Davis Polk & Wardwell Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Dr. Bonnie T. Kay		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1245 Denbigh Lane		Transaction ID: 2238774	
City State Zip Code Radnor PA 19087	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director of Employment Dev. The Brickman Group Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 662 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Cele S Keeper		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 2929 Buffalo Speedway #203		Transaction ID: 2233947
City State Zip Code Houston TX 77098	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Mrs. Raelene W. Keffer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 7745 Indian Oaks Dr Apt H102		Transaction ID: 2239783
City State Zip Code Vero Beach FL 32966	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	
Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Maureen Kelly		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 1634 Herrin Street		Transaction ID: 2231411
City State Zip Code Redondo Beach CA 90278	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Banker	
Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 663 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia Kelly-White

Mailing Address 223 Linden Avenue

City State Zip Code
Bradford CT 06405

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2238250

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Marcy Kempner

Mailing Address 118 Rockland Circle

City State Zip Code
Wilmington DE 19803

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231377

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary Lou Kennedy

Mailing Address 1765 W Ainslie St

City State Zip Code
Chicago IL 60640

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

Name of Employer Occupation
First Amer. Ins. Company Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 7

Transaction ID: 2233170

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 664 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Paulette Kessler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 2715 Steiner Street		Transaction ID: 2233870
City State Zip Code San Francisco CA 94123	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation homemaker	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Polly W. Ketro		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 41 W. 76th Street		Transaction ID: 2240380
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Joyce A. Kidd		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 9982 Reevesbury Drive		Transaction ID: 2233998
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation None Student	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 665 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol J. Kiecker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 8430 Pennsylvania Road # 204		Transaction ID: 2232117
City State Zip Code Bloomington MN 55438	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Jeanie Kilgour		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 6727 Woodcreek Road		Transaction ID: 2235772
City State Zip Code Charlevoix MI 49720	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mr. Edward M Kimmel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 7629 Carroll Avenue		Transaction ID: 2238257
City State Zip Code Takoma Park MD 20912	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Bankruptcy Attorney Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 666 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen Kinley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 333 East 6th Street		Transaction ID: 2233220	
City State Zip Code Ontario CA 91764	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ontario Montclair Schools	Occupation Educator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mrs. Janet C. Kireker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address P.O. Box 128		Transaction ID: 2239038	
City State Zip Code Ho Ho Kus NJ 07423	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mrs. Clay Kenan Kirk		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 320 East 72nd St., Apt. 5C		Transaction ID: 2232921	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Investment Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 667 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Evers Kirwan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 2184 Roscomare Road		Transaction ID: 2239847	
City State Zip Code Los Angeles CA 90077	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Landscape Designer Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Ms. Jennie Kixmiller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 1678 8th Avenue		Transaction ID: 2235076	
City State Zip Code Brooklyn NY 11215	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) C. Mrs. Josephine Klein		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address 1400 Waverly Road V-20		Transaction ID: 2233807	
City State Zip Code Gladwyne PA 19035	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1135.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 668 / 1028
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joanne Klupacs		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 13548 Castle Street		Transaction ID: 2236944
City State Zip Code Southgate MI 48195	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Ms. Dorothy F Knecht		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address 17 Bret Harte Terrace		Transaction ID: 2231551
City State Zip Code San Francisco CA 94133	Amount of Each Receipt this Period 1300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) C. Ms. H Jean Kraft		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 508 Weir Road		Transaction ID: 2234019
City State Zip Code Aston PA 19014	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	1560.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 669 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth S. Kram		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 111 Coccio Drive		Transaction ID: 2233600	
City State Zip Code West Orange NJ 07052	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Cheryl Kreiter		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1348 West Wrightwood Avenue		Transaction ID: 2238418	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Philip Krevitsky		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 56 Roger Drive		Transaction ID: 2240343	
City State Zip Code Port Washington NY 11050	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CPA	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 670 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Robin Krivanek		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 3016 Turtle Gait Lane		Transaction ID: 2238243
City State Zip Code Sanibel FL 33957	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Constance A Krueger		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 150 E. 69th Street #4K		Transaction ID: 2238635
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathryn Kuehl		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 3400 Sullivan Court Apt.175		Transaction ID: 2232775
City State Zip Code Modesto CA 95356	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Personnel Analyst Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional) ▶	3600.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 671 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathryn Kuehl		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 3400 Sullivan Court Apt.175		Transaction ID: 2234634	
City Modesto	State CA	Zip Code 95356	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer California Department of Corrections		Occupation Personnel Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Ms. Connie A Kuncicky		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 228 Cedar Ridge Circle		Transaction ID: 2233210	
City St. Augustine	State FL	Zip Code 32080	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Camille Kurtz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 2401 Calvert Street NW Apt. 902		Transaction ID: 2234383	
City Washington	State DC	Zip Code 20008	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	380.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 672 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Jeffrey C. Lamkin		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007	
Mailing Address 2963 Hudson Aurora Road		Transaction ID: 2236569	
City State Zip Code Hudson OH 44236	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Ohio Retina Associates	Occupation Ophthalmologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Ms. Margaret Land		Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2007	
Mailing Address 778 W Belleview Avenue		Transaction ID: 2232776	
City State Zip Code Porterville CA 93257	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. Ms. Margaret Land		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007	
Mailing Address 778 W Belleview Avenue		Transaction ID: 2236804	
City State Zip Code Porterville CA 93257	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	165.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 673 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Land

Mailing Address 778 W Bellevue Avenue

City State Zip Code
Porterville CA 93257

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

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	7

Transaction ID: 2239323

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Mary Landis

Mailing Address 508 W. Locust Street

City State Zip Code
Polo IL 61064

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

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	7

Transaction ID: 2239382

Amount of Each Receipt this Period
150.00

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

Mailing Address 58 Holly Oak Drive

City State Zip Code
Voorhees NJ 08043

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

Name of Employer Occupation
Self-employed Publisher

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	0	7

Transaction ID: 2238796

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **5250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 674 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cornelia W. Lanou		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 90 Keene Street		Transaction ID: 2231806	
City State Zip Code Providence RI 02906	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 325.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Ann Evans Larimore		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 916 Olivia Ave		Transaction ID: 2237247	
City State Zip Code Ann Arbor MI 48104	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Professor Retired	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mrs. Lowell Leake		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1692 Towerwoods Dr		Transaction ID: 2236947	
City State Zip Code Cincinnati OH 45224	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Professor	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 675 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Dana S Lee		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 208 Satin Mist Court		Transaction ID: 2240818	
City State Zip Code Las Vegas NV 89144	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer self-employed Occupation Non-profit advocate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Donna Leet		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 5809 Woodcreek Ln		Transaction ID: 2235598	
City State Zip Code Middleton WI 53562	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mrs. Mary C Lellouche		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 18510 66th Avenue Northeast		Transaction ID: 2236102	
City State Zip Code Kenmore WA 98028	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00		

SUBTOTAL of Receipts This Page (optional) ▶	390.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 676 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Mary C Lellouche		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 7	
Mailing Address 18510 66th Avenue Northeast		Transaction ID: 2234058	
City State Zip Code Kenmore WA 98028	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 310.00		

Full Name (Last, First, Middle Initial) B. Ms. Carol Leonard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 540 Liberty Street		Transaction ID: 2232396	
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Carol Leonard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 540 Liberty Street		Transaction ID: 2232549	
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 677 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. James J. Leonard, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 31 W San Juan Avenue		Transaction ID: 2239551
City State Zip Code Phoenix AZ 85013	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Karen M. Leonard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 323 Mill Street		Transaction ID: 2238392
City State Zip Code Saint Paul MN 55102	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation consultant	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hon. Cindy Lerner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 5901 Moss Ranch Road		Transaction ID: 2238274
City State Zip Code Miami FL 33156	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Attorney/Consultant/Legislator	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 678 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Virginia Levenback

Mailing Address 4124 Milton Street

City State Zip Code
Houston TX 77005

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

Name of Employer Occupation
Virginia Levenback Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 26 / 2007

Transaction ID: 2239478

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Dr. F. Lynn Leverett

Mailing Address 7604 SW 178 Terrace

City State Zip Code
Miami FL 33157

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 13 / 2007

Transaction ID: 2233177

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Canice K. Levin

Mailing Address 3436 Bannerwood Dr.

City State Zip Code
Annandale VA 22003

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

Name of Employer Occupation
BRTRC Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 19 / 2007

Transaction ID: 2233841

Amount of Each Receipt this Period
150.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 679 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Gerald D. Levy		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 333 East 68th Street		Transaction ID: 2239742
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Harold B. Lewis, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 1307 4th Avenue		Transaction ID: 2232871
City State Zip Code Asbury Park NJ 07712	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Judith L. Lichtman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 2930 Ellicott Street, N.W.		Transaction ID: 2232368
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ntl. Ptnership for Women & Families Occupation Consultant	Aggregate Year-to-Date ▼ 900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 680 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith L. Lichtman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 2930 Ellicott Street, N.W.		Transaction ID: 2233933	
City State Zip Code Washington DC 20008		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Nil. Ptnership for Women & Families		Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Ms. Norma Liebenberg		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 49 Starboard Tack Drive		Transaction ID: 2239219	
City State Zip Code Salem SC 29676		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Suzy N Liff		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 7	
Mailing Address 3600 Hoods Hill Rd		Transaction ID: 2233186	
City State Zip Code Nashville TN 37215		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer the Estuary		Occupation counselor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 681 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Mary D. Lindstrom		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 415 7th St. SW		Transaction ID: 2237028	
City Willmar	State MN	Zip Code 56201	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ms. Kathleen L Lingo		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 137 Riverside Dr.		Transaction ID: 2233957	
City New York	State NY	Zip Code 10024	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Mrs. Linda Locke		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 6925 Cornell		Transaction ID: 2236088	
City St. Louis	State MO	Zip Code 63130	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard International	Occupation Public Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

SUBTOTAL of Receipts This Page (optional)	685.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 682 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Estelle Loeb		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 3890 Nobel Dr Unit		Transaction ID: 2237041	
City State Zip Code San Diego CA 92122	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Ms. Eva T. Chernov Lokey		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 601 Laurel Avenue Apt. 406		Transaction ID: 2233138	
City State Zip Code San Mateo CA 94401	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Ali Long		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 340 Montford Ave.		Transaction ID: 2239485	
City State Zip Code Mill Valley CA 94941	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Springcreek Foundation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Family Foundation President Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 683 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Carol Louchheim		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 7 Brent Court		Transaction ID: 2233531	
City State Zip Code Menlo Park CA 94025		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Retail			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Ms. Pamela L Lowry		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 175 Milton Street Unit 17		Transaction ID: 2239979	
City State Zip Code Milton MA 02186		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Ms. Linda Lee Lubitz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 12558 The Vista		Transaction ID: 2239122	
City State Zip Code Los Angeles CA 90049		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	7250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 684 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Col. Ruth A. Lucas		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1100 6th Street, S.W. Apartment 704		Transaction ID: 2237348	
City Washington State DC Zip Code 20024	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. Ms. Sarah L. Luna		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1319 E. Louis Way		Transaction ID: 2234402	
City Tempe State AZ Zip Code 85284	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer IKON Communications, P.A. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Associate Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Joanne Lyman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 163 East 81st, # 8B		Transaction ID: 2233153	
City NYC State NY Zip Code 10028	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Metropolitan Museum of Art Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation designer Aggregate Year-to-Date ▼ 590.00		

SUBTOTAL of Receipts This Page (optional) ▶	2950.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 685 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joanne Lyman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 163 East 81st, # 8B		Transaction ID: 2234471	
City State Zip Code NYC NY 10028	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Metropolitan Museum of Art	Occupation designer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00		

Full Name (Last, First, Middle Initial) B. Ms. Mary K. Lynch		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1020 Cotorro Ave.		Transaction ID: 2238258	
City State Zip Code Coral Gables FL 33146	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Linda MacCracken		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 7814 126th Avenue SE		Transaction ID: 2237233	
City State Zip Code Renton WA 98056	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1335.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 686 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Leanne Hull MacDougall

Mailing Address 8317 LaJolla Shores Drive

City LaJolla State CA Zip Code 92037

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

Name of Employer Leanne Hull Fine Art Occupation Art Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	0	7

Transaction ID: 2232585

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Prof. Thomas A. Madden

Mailing Address 9130 Kedvale Avenue

City Skokie State IL Zip Code 60076

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	0	7

Transaction ID: 2232127

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Lynette Maddocks Gatlin

Mailing Address 7731 Broadway Street, #J45

City San Antonio State TX Zip Code 78209

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	0	7

Transaction ID: 2234387

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 687 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Margaret C. Madeira		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 226 Joseph's Way		Transaction ID: 2238203	
City Frazer State PA Zip Code 19355	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unisys Corp. Occupation Customer Service	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Susan B. Magee		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 4000 Cathedral Avenue NW Apartment 604B		Transaction ID: 2234380	
City Washington State DC Zip Code 20016	Amount of Each Receipt this Period 2200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Writer	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Jan E Maisel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 150 Hacienda Dr.		Transaction ID: 2232370	
City Tiburon State CA Zip Code 94920	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Rowe, Maisel, Heath, & Harvey Inc. Occupation Pediatrician	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2950.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 688 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Marianne W Makman

Mailing Address 46 Rogers Drive

City State Zip Code
New Rochelle NY 10804

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 20 / 2007

Transaction ID: 2236933

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Barbara H. Malcolm

Mailing Address 4775 S Harbor Dr Apt 101

City State Zip Code
Vero Beach FL 32967

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 11 / 2007

Transaction ID: 2232958

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Ann Malester

Mailing Address 5432 30th Place, N.W.

City State Zip Code
Washington DC 20015

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

Name of Employer Occupation
Weil, Gotshal & Manges LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 19 / 2007

Transaction ID: 2233845

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 689 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jacqueline Mann		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 10 Old Road Lane		Transaction ID: 2231402
City State Zip Code Mount Kisco NY 10549	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Kathleen Markey		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address P.O. Box 367		Transaction ID: 2232810
City State Zip Code Cheyenne WY 82003	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan Marsch		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 139 Carmel		Transaction ID: 2239174
City State Zip Code San Francisco CA 94117	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Latham & Watkins	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 690 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Julia M. Marsden		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1701 Spyglass Drive #11		Transaction ID: 2239302
City State Zip Code Austin TX 78746	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary E. Marshall		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 4133 42nd Avenue NE		Transaction ID: 2231733
City State Zip Code Seattle WA 98105	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Mr. David B. Martens		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address PO Box 1810		Transaction ID: 2235127
City State Zip Code Anacortes WA 98221	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Buckner News Alliance Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 691 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann R. Martin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 46 Lighthouse Way		Transaction ID: 2238251
City State Zip Code Loveladies NJ 08008	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Bunny Martin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 146 Castle Crest Road		Transaction ID: 2240611
City State Zip Code Alamo CA 94507	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Food Stylist	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Denise B Martin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 35 Bond Street		Transaction ID: 2231663
City State Zip Code New York NY 10012	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Editor	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 692 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Denise B Martin

Mailing Address 35 Bond Street

City State Zip Code
New York NY 10012

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

Name of Employer Occupation
Dow Jones Editor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2239314

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Lucretia L. Martin

Mailing Address PO Box 151

City State Zip Code
Orford NH 03777

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

Name of Employer Occupation
Dartmouth College Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 2233084

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Margaret E. Martin

Mailing Address 10450 Lottsford Road #4009

City State Zip Code
Mitchellville MD 20721

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231416

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 693 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Susan W. Masland

Mailing Address 1430 E. Hermitage Road

City Bayside State WI Zip Code 53217

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
04 / 24 / 2007

Transaction ID: 2234405

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Kate Massengale

Mailing Address 44 Tango Road

City Santa Fe State NM Zip Code 87506

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

Name of Employer University of New Mexico Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
04 / 18 / 2007

Transaction ID: 2235077

Amount of Each Receipt this Period
100.00

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

Mailing Address 3887 S. Hills Circle

City Fort Worth State TX Zip Code 76109

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

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
04 / 27 / 2007

Transaction ID: 2240430

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 694 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Warren E Mathews

Mailing Address 1010 Centinela Ave

City State Zip Code
Santa Monica CA 90403

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231417

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Nina Barbara Matis

Mailing Address 257 Central Park West
Apt 2e/f

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Katten Muchin Zavis Rosenmann Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232401

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Mr. William Mattsson

Mailing Address 27 Northcrest Drive

City State Zip Code
Clifton NY 12065

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 2233059

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 695 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Maurer-Geller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 2613 Toledo Street		Transaction ID: 2238276	
City State Zip Code Coral Gables FL 33134	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Joan P Maxwell		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 3525 Springland Lane NW		Transaction ID: 2233555	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Chaplain	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. George W. Mayeske		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 12524 Knowledge Lane		Transaction ID: 2239942	
City State Zip Code Bowie MD 20715	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	5750.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 696 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Beverly McBride

Mailing Address 409 E. Washington Street

City State Zip Code
Lewisburg WV 24901

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

Name of Employer Self Occupation
Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2238248

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Elisa McCarthy

Mailing Address 218 Auburn Road

City State Zip Code
W. Hartford CT 06119

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2234488

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Mrs. Margaret McCarthy

Mailing Address 3326 Alpine Drive

City State Zip Code
Ann Arbor MI 48108

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 2233129

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 385.00

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

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

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

FOR LINE NUMBER: PAGE 697 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Margaret McCarthy

Mailing Address 3326 Alpine Drive

City State Zip Code
Ann Arbor MI 48108

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2234544

Amount of Each Receipt this Period
85.00

B. Full Name (Last, First, Middle Initial)
Ms. Susan McClary

Mailing Address 3029 Barry Avenue

City State Zip Code
Los Angeles CA 90066

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

Name of Employer Occupation
UCLA Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240541

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Kathleen M McCormick

Mailing Address 19928 Wissler Ranch Road

City State Zip Code
Black Forest CO 80908

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

Name of Employer Occupation
civil service analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232885

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1585.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 698 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Nancy W McCracken		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 900 N Taylor Street Apt. 1631		Transaction ID: 2237280
City Arlington State VA Zip Code 22203	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B. Full Name (Last, First, Middle Initial) Ms. Melinda McCune		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1315 N Spaulding Ave		Transaction ID: 2234551
City Los Angeles State CA Zip Code 90046	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer Self	Occupation Property Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

C. Full Name (Last, First, Middle Initial) Ms. Suzanne R McDowell		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 4821 Ft .Sumner Drive		Transaction ID: 2233997
City Bethesda State MD Zip Code 20816	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Steptoe & Johnson LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 699 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Dusa McDuff Mailing Address 3 Laurel Lane City State Zip Code Setauket NY 11733 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2236980 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	0	7	250.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	4		2	0		2	0	0	7															
250.00																								
Name of Employer Occupation SUNY Professor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">500.00</td> </tr> </table>	500.00																					
500.00																								

B. Full Name (Last, First, Middle Initial) Ms. Elizabeth R. McGee Mailing Address 10100 Cypress Cove Drive Apt. 103 City State Zip Code Fort Myers FL 33908 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2240650 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	7	250.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	4		3	0		2	0	0	7															
250.00																								
Name of Employer Occupation Self Lawyer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">500.00</td> </tr> </table>	500.00																					
500.00																								

C. Full Name (Last, First, Middle Initial) Ms. D. E. McGill Mailing Address POB 619 Lake Vallecito City State Zip Code Bayfield CO 81122 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2233575 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	0	7	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	4		1	3		2	0	0	7															
100.00																								
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">500.00</td> </tr> </table>	500.00																					
500.00																								

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 700 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Beverly E. McKee		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 4055 52nd Terrace NW		Transaction ID: 2234398	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Robert McKee		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 316 E 80th Street, Apt 3W		Transaction ID: 2238121	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Graphic Artist	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Martha H. McMahon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address PO Box 65304		Transaction ID: 2236297	
City State Zip Code Port Ludlow WA 98365	Amount of Each Receipt this Period 53.00		
FEC ID number of contributing federal political committee. C			
Name of Employer IBM Occupation Contact Mgr	Aggregate Year-to-Date ▼ 212.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2853.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 701 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Megan L. McManemin

Mailing Address 5145 Yolanda Lane

City State Zip Code
Dallas TX 75229

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237397

Amount of Each Receipt this Period
5000.00

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

Mailing Address 400 E. Randolph St
Apt. 3811

City State Zip Code
Chicago IL 60601

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

Name of Employer Occupation
First Options Computer Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232204

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Belle Miller McMaster

Mailing Address 4 Downshire Ln

City State Zip Code
Decatur GA 30033

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

Name of Employer Occupation
Emory University Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2239226

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 702 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Shirley M. McNally

Mailing Address 110 Ames St Unit 5

City State Zip Code
Elk Rapids MI 49629

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2007

Transaction ID: 2234748

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mrs. Sydney K McQuoid

Mailing Address 6523 Ia Manga

City State Zip Code
Dallas TX 75248

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

Name of Employer Occupation
Oxygen Media Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2007

Transaction ID: 2232802

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Ms. Carolyn A Megal

Mailing Address 3490 Oak Knoll

City State Zip Code
Brighton MI 48114

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

Name of Employer Occupation
Huntsman Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2007

Transaction ID: 2232747

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	575.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 703 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ruby H. Melton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 143 West Walk		Transaction ID: 2234318
City State Zip Code West Haven CT 06516	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Louis Dreyfus Corp.	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Ms. Susan E. Mensch		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 566 Parkside Court		Transaction ID: 2240174
City State Zip Code Allentown PA 18104	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Lehigh Portland Cement Co.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Ms. Rebecca S. Mericle		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 1982 Kroupa Road		Transaction ID: 2240313
City State Zip Code Traverse City MI 49686	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 704 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. A W Merrill		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1300 Clayton St.		Transaction ID: 2239760	
City State Zip Code San Francisco CA 94114		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Charles Schwab & Co. Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Charles Merrill, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 5 Chestnut Street		Transaction ID: 2240655	
City State Zip Code Boston MA 02108		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Ms. Frances M Merryman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 3450 E. Sunrise Drive Suite 100		Transaction ID: 2234045	
City State Zip Code Tucson AZ 85718		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Northern Trust, NA Wealth Strategist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 705 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Paula Merwin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address P.O. Box 809		Transaction ID: 2240001	
City Haiku	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96708		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Occupation Housewife		Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mrs. Susan Messina		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 910 Hilldale Avenue		Transaction ID: 2232696	
City Berkeley	State CA	Amount of Each Receipt this Period 250.00	
Zip Code 94708		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Occupation Professor		Amount of Each Receipt this Period 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Meyer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 2704 Bayview Dr		Transaction ID: 2238606	
City Alameda	State CA	Amount of Each Receipt this Period 200.00	
Zip Code 94501		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Occupation Farmer		Amount of Each Receipt this Period 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	550.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 706 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Miss Loretta Michaelcheck		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 65 Central Pk W # 12E		Transaction ID: 2234868	
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation feng shui consultant	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Katharine Mieszkowski		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 220 Filbert Street		Transaction ID: 2233317	
City State Zip Code San Francisco CA 94133	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Salon.com Occupation Writer	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Katharine Mieszkowski		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 220 Filbert Street		Transaction ID: 2233495	
City State Zip Code San Francisco CA 94133	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Salon.com Occupation Writer	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	565.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 707 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ariadna Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4200 Massachusetts Ave NW # 302		Transaction ID: 2238478	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Concetta B. Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 137 E. 36th Street # 26K		Transaction ID: 2240373	
City State Zip Code New York NY 10016	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation HR EXEC	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Emily Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 5750 E Lucia Walk		Transaction ID: 2236019	
City State Zip Code Long Beach CA 90803	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Professor	Aggregate Year-to-Date ▼ 540.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1315.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 708 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Emily Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 5750 E Lucia Walk		Transaction ID: 2236020
City State Zip Code Long Beach CA 90803	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Cal.State.Univ.	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

B. Full Name (Last, First, Middle Initial) Ms. Galen J. Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 2423 Butler Bay Dr. N.		Transaction ID: 2232371
City State Zip Code Windermere FL 34786	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Great Horse Gifts	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ms. Judith Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 6023 E. 52nd Place		Transaction ID: 2234423
City State Zip Code Indianapolis IN 46226	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	865.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 709 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Pat J. Miller

Mailing Address 821 San Francisco Court

City State Zip Code
Stanford CA 94305

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239460

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Madeline H. Mixer

Mailing Address 76 Bonnie Lane

City State Zip Code
Berkeley CA 94708

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: 2232565

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Sharon K. Mohler

Mailing Address 1050 Carolan Avenue, Apt. 110

City State Zip Code
Burlingame CA 94010

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239865

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **2200.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 710 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Miss Helen Moksnes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1835 Corporal Kennedy Street		Transaction ID: 2239812	
City State Zip Code Bayside NY 11360	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Help Clearview Senior Center	Occupation Volunteer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) B. Ms. Jennifer Monga		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 17 Saint Charles Avenue		Transaction ID: 2238451	
City State Zip Code Wheeling WV 26003	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mrs. Jeanne Moore		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 12 Somer Drive		Transaction ID: 2232317	
City State Zip Code Somerville NJ 08876	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Borough of Somerville, NJ		Occupation Borough Councilwoman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 711 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen J Moore		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 601 Eagles Wing Ct.		Transaction ID: 2232804	
City State Zip Code Linthicum Heights MD 21090	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sinai Hospital	Occupation Coding Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00		

Full Name (Last, First, Middle Initial) B. Ms. Karen J Moore		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 601 Eagles Wing Ct.		Transaction ID: 2236870	
City State Zip Code Linthicum Heights MD 21090	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sinai Hospital	Occupation Coding Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00		

Full Name (Last, First, Middle Initial) C. Ms. Diana L Morabito		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 1976 Abinante Lane		Transaction ID: 2233090	
City State Zip Code San Jose CA 95124	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Siemens	Occupation Software Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

SUBTOTAL of Receipts This Page (optional) ▶	515.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 712 / 1028
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diana L Morabito		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 1976 Abinante Lane		Transaction ID: 2234670	
City State Zip Code San Jose CA 95124	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Siemens	Occupation Software Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

Full Name (Last, First, Middle Initial) B. Ms. Hannah Morehouse		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 41 Crescent St		Transaction ID: 2236095	
City State Zip Code Northampton MA 01060	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Catherene J. Morton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address PO Box 751		Transaction ID: 2242021	
City State Zip Code Tucson AZ 85702	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Terri's Consignment & Design	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	5080.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 713 / 1028
(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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Evelyn L. Moss

Mailing Address 1240 Ulfinian Way

City State Zip Code
Martinez CA 94553

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 0 7

Transaction ID: 2233810

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Judith C. Mower

Mailing Address 429 N. Franklin Street
Apt. 2-504

City State Zip Code
Syracuse NY 13204

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

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232282

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Sharon L. Mueller

Mailing Address 2172G SW Park Place Unit G

City State Zip Code
Portland OR 97205

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2234410

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 714 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Lisa Munro		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1514 Wood Ln		Transaction ID: 2238150	
City State Zip Code Madison WI 53705	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Univ. Of WI - Madison	Occupation Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ms. Lisa Munro		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 1514 Wood Ln		Transaction ID: 2240782	
City State Zip Code Madison WI 53705	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Univ. Of WI - Madison	Occupation Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Ms. Nancy Munroe		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 2355 E. Miraval Segundo		Transaction ID: 2233229	
City State Zip Code Tucson AZ 85718	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 715 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laura Murphy		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 7718 Ridge Drive NE		Transaction ID: 2240146	
City State Zip Code Seattle WA 98115	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Terri L. Murtland		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 7250 Park Lake Dr..		Transaction ID: 2234867	
City State Zip Code Dexter MI 48130	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Nurse-Midwife	Aggregate Year-to-Date ▼ 340.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Beverly J. Myers		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2066 Promontory Point Lane		Transaction ID: 2239334	
City State Zip Code Gold River CA 95670	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation pathologist	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 716 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Donald E Myers		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 3322 East Waverly		Transaction ID: 2240415	
City State Zip Code Tucson AZ 85716	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Joseph E. Napolitano		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 6306 Dahonega Road		Transaction ID: 2237404	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Lisa D. Nash		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 25 Seki Court		Transaction ID: 2232590	
City State Zip Code Emerald Hills CA 94062	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LN Marketing Associates Occupation president	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 717 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cheryl Nesler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 78-6835 Keaupuni St		Transaction ID: 2236828	
City State Zip Code Kailua Kona HI 96740	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) B. Ms. Julie Neu		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 67 Washington Ave		Transaction ID: 2233920	
City State Zip Code Chatham NJ 07928	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation consultant Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth F. Neuwirth		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1640 Pasadena Glen Road		Transaction ID: 2234349	
City State Zip Code Pasadena CA 91107	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	565.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 718 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sara Rutherford Nichols		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1824 Old Ranch Road		Transaction ID: 2234403	
City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. Keith E. Nighthenheler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 4235 West 300 South		Transaction ID: 2235578	
City State Zip Code Greencastle IN 46135	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Teacher Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) C. Ms. Sarah M Nolan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 2 Cliff Rd		Transaction ID: 2232798	
City State Zip Code Bel Tiburon CA 94920	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consulting Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	635.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 719 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Tori Nourafchan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 302 Amalfi Drive		Transaction ID: 2233248	
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Bettye H Nowlin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 3327 Far View Drive		Transaction ID: 2238789	
City State Zip Code Austin TX 78730	Amount of Each Receipt this Period 4000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Dr. Danielle Nyman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 619 Jones Road		Transaction ID: 2231676	
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Friends Select School Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director of Upper School Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	4750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 720 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Obermeier		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 4707 Snapdragon Way		Transaction ID: 2240339
City State Zip Code San Luis Obispo CA 93401	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Susan O'Brien, M.D.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 14 East Greenway # 28E		Transaction ID: 2239458
City State Zip Code Houston TX 77046	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Physician	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Michael O'Connor		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 649 E. 14th Street, Apt. 2C		Transaction ID: 2237303
City State Zip Code New York NY 10009	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 721 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Leslie Oelsner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 1451 N. Canterbury Road		Transaction ID: 2235318	
City State Zip Code Fayetteville AR 72701		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Social Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

B. Full Name (Last, First, Middle Initial) Mr. Virginia Ogle		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address PO Box 277		Transaction ID: 2239649	
City State Zip Code Mendenhall PA 19357		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Ms. Susan Ohorodnik		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 711 Astor Lane		Transaction ID: 2240252	
City State Zip Code Franklin Park NJ 08823		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Taylor Technology, Inc Occupation Scientist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 722 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sylvia Brown Olivetti		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1917 Locust Grove Road		Transaction ID: 2234463
City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Arent Fox	Occupation Legal Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	

Full Name (Last, First, Middle Initial) B. Ms. Janice W. O'Rourke		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 11211 Lake Louisa Road		Transaction ID: 2232803
City State Zip Code Clermont FL 34711	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bank of America	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Ms. Janice W. O'Rourke		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 11211 Lake Louisa Road		Transaction ID: 2234003
City State Zip Code Clermont FL 34711	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bank of America	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 723 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Yael Ouzillou		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 3503 Winfield Drive		Transaction ID: 2234016	
City Austin State TX Zip Code 78704	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Jean Carnahan for Missouri	Occupation Fundraiser		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Ms. Carla L. Overberger		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 37 Nokomis Avenue		Transaction ID: 2235592	
City San Anselmo State CA Zip Code 94960	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer ACME Business Corp	Occupation Business Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

C. Full Name (Last, First, Middle Initial) Mrs. Mary Lou Owen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 1624 NW Buttonbush Cir.		Transaction ID: 2233251	
City Palm City State FL Zip Code 34990	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	585.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 724 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann M. Packard		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 532 East 87th Street		Transaction ID: 2234466	
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NY Hospital	Occupation Pediatric Resident		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) B. Ms. Ann L. Paes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 4160 SW 83rd Ave.		Transaction ID: 2233533	
City State Zip Code Portland OR 97225	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Mrs. Mary Frances Palmer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 504 Lake Street		Transaction ID: 2240758	
City State Zip Code Winona MN 55987	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 725 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Hanna Papanek		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 2 Mason Street		Transaction ID: 2234391
City Lexington	State MA	Zip Code 02421
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self and BIDE	Occupation writer and economist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Warren Pearse		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 10450 Lottsford Road Unit 5005		Transaction ID: 2233842
City Bowie	State MD	Zip Code 20721
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Katherine Pearson		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address P.O. Box 55		Transaction ID: 2232791
City Canton Center	State CT	Zip Code 06020
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 726 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laura B. Peck		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 4545 Grand Avenue		Transaction ID: 2234886	
City Ojai State CA Zip Code 93023	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Community Action Consultant	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Perry C Peine		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 343 Bellaire St.		Transaction ID: 2239303	
City Denver State CO Zip Code 80220	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Ann Percival		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 68 Brays Island Drive		Transaction ID: 2238252	
City Sheldon State SC Zip Code 29941	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 727 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Joseph Pereles		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2007
Mailing Address 13456 Maple Ridge Court		Transaction ID: 2233506
City State Zip Code Saint Louis MO 63141	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marla S Perkel		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007
Mailing Address P.O. Box 755		Transaction ID: 2234630
City State Zip Code Wellfleet MA 02667	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 420.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Marla S Perkel		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2007
Mailing Address P.O. Box 755		Transaction ID: 2238801
City State Zip Code Wellfleet MA 02667	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 420.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	370.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 728 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Gordon Perkin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 302 Lakeside Avenue S. Apartment #103		Transaction ID: 2239222
City State Zip Code Seattle WA 98144	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. John Perkins		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 6266 Rose Hill Drive Apt. 1A		Transaction ID: 2233822
City State Zip Code Alexandria VA 22310	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Blanche I. Perlman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 265 Mountainside Road		Transaction ID: 2233224
City State Zip Code Mendham NJ 07945	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 729 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia Perrin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 10 Deans Court		Transaction ID: 2233797
City State Zip Code Santa Fe NM 87508	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer US Dept. of State	Occupation Foreign Service Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Ely Peterson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 3260 N. 12th Street Apt. 221		Transaction ID: 2239898
City State Zip Code Grand Jct CO 81506	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Claire Phillips		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 1249		Transaction ID: 2238757
City State Zip Code Big Timber MT 59011	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 730 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Christine P. Pickford		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 1104 N. 18th Street		Transaction ID: 2234327
City State Zip Code Boise ID 83702	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Psychologist	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Susan B Piepho		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 137 Woodland Road		Transaction ID: 2237292
City State Zip Code Sweet Briar VA 24595	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Sweet Briar College Occupation Chemistry Professor	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Jolie B. Pillsbury		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 1500 22nd Street North		Transaction ID: 2233231
City State Zip Code Arlington VA 22209	Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Sherbrooke Consulting, Inc. Occupation Consultant	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 731 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rebecca Pincus		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 700 N. Dobson #8		Transaction ID: 2234047
City State Zip Code Chandler AZ 85224	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Pincus & Assoc.	Occupation Office Admin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Judith Pinsker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 121 Elmwood Road		Transaction ID: 2238596
City State Zip Code Wellesley MA 02481	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda L. Pirtle		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address P.O. Box 1259		Transaction ID: 2234404
City State Zip Code Capitan NM 88316	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Horse Breeder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 732 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Dorothy Polash		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 20 Fox Hill		Transaction ID: 2239470	
City Woodside	State CA	Zip Code 94062	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3400.00		

B. Full Name (Last, First, Middle Initial) Dr. Ellen M. Poss		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 450 Warren Street		Transaction ID: 2232659	
City Brookline	State MA	Zip Code 02445	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

C. Full Name (Last, First, Middle Initial) Ms. Ruth W. Potts		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 800 Woodacres Road		Transaction ID: 2232581	
City Santa Monica	State CA	Zip Code 90402	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 733 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Howard C. Poulter

Mailing Address 4375 Bridgeview Drive

City State Zip Code
Oakland CA 94602

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
4415.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: 2237424

Amount of Each Receipt this Period
4165.00

**[MEMO ITEM]
MEMO(STOCK)**

B. Full Name (Last, First, Middle Initial)
Ms. Mary Jane Powell

Mailing Address 31 Cheever Circle

City State Zip Code
Andover MA 01810

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

Name of Employer Occupation
Treasurer MA Democratic Party

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: 2239355

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Ms. Susan H Press

Mailing Address 3604 Shepherd Street

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: 2239524

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	▶	2050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 734 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Elizabeth F Prestemon		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 7	
Mailing Address 401 Russell Ave Apt		Transaction ID: 2233169	
City State Zip Code Gaithersburg MD 20877	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Mrs. Mary R Price		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 3 / 2 0 0 7	
Mailing Address 765 10th Street		Transaction ID: 2231457	
City State Zip Code Boulder CO 80302	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Dawn Prince		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 655 14th Street		Transaction ID: 2239459	
City State Zip Code san francisco CA 94114	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation insurance sales Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 735 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rosemary Probst		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 150 E. 27th Street, Apt. 4K		Transaction ID: 2238572
City State Zip Code New York NY 10016	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Allyn K Prosten		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 3513 Northampton St., N.W.		Transaction ID: 2233117
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation School Director	Aggregate Year-to-Date ▼ 550.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. David A Pyne		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 7248 Eaton Court		Transaction ID: 2238832
City State Zip Code Dexter MI 48130	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 736 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Quam

Mailing Address 407 N. 1st Street

City Marshalltown State IA Zip Code 50158

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 11 / 2007

Transaction ID: 2232843

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Marjorie B. Rachlin

Mailing Address 2919 Brandywine St. NW

City Washington State DC Zip Code 20008

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 03 / 2007

Transaction ID: 2231455

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Marjorie B. Rachlin

Mailing Address 2919 Brandywine St. NW

City Washington State DC Zip Code 20008

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 05 / 2007

Transaction ID: 2232147

Amount of Each Receipt this Period
4700.00

SUBTOTAL of Receipts This Page (optional) ► 5250.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 737 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Evelyn M Radford		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 810 El Quanito Dr.		Transaction ID: 2239398	
City State Zip Code Danville CA 94526	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1700.00		

Full Name (Last, First, Middle Initial) B. Dr. Eric L. Raefsky, M.D.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 6130 South Mount Juliet Road		Transaction ID: 2231414	
City State Zip Code Hermitage TN 37076	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Tennessee Oncology Consultants Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Dr. William Douglas Ramos		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 2550 E. Desert Inn Road #339		Transaction ID: 2239472	
City State Zip Code Las Vegas NV 89121	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1800.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 738 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Anna T. Rand

Mailing Address 320 West 86th Street

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2239331

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dr. Jan A Randall

Mailing Address 862 Jonive Road

City State Zip Code
Sebastopol CA 95472

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2240021

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Janice W Randle

Mailing Address 1801 W. 29th St.

City State Zip Code
Austin TX 78703

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

Name of Employer Occupation
St. Edward's University College Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2238320

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 600.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 739 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Bonnie M. Rathjen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 4125 Mohor Avenue Ste. E2		Transaction ID: 2238216
City State Zip Code Pleasanton CA 94566	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Physician	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Larry Regis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 663 Orange Avenue		Transaction ID: 2238553
City State Zip Code Los Altos CA 94022	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Rice		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 712 Germantown Pike		Transaction ID: 2233666
City State Zip Code Lafayette Hill PA 19444	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AEO Occupation Mgt Consultant	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 740 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bernadine Rice		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 1329 Belgrade Avenue		Transaction ID: 2232444	
City State Zip Code Orlando FL 32803	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer OCSO	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Janet Rice		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4870 W. Lake Harriet Pkwy		Transaction ID: 2238391	
City State Zip Code Minneapolis MN 55410	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bethesda Clinic	Occupation Psychologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Sarah Beinecke Richardson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 305 Beavertail Road		Transaction ID: 2237237	
City State Zip Code Jamestown RI 02835	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 741 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Florence Reif Richman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 40 W. 77th Street #15E		Transaction ID: 2238537	
City State Zip Code New York NY 10024		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

B. Full Name (Last, First, Middle Initial) Ms. Audrey B. Richman Kaplan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 3831 Turtle Creek #20E		Transaction ID: 2233552	
City State Zip Code Dallas TX 75219		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Investor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Ms. Eleanor Richmond		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 122 Palmers Hill Rd Apt. 1114		Transaction ID: 2239116	
City State Zip Code Stamford CT 06902		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 742 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jane Rinck

Mailing Address 488 Betts Bridge Road

City Wells State VT Zip Code 05774

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239634

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Christine Ring

Mailing Address 2020 Addison

City Houston State TX Zip Code 77030

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

Name of Employer Occupation Business Line Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239484

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Alyce R Ritti

Mailing Address 170 Cherrywood Way

City Port Matilda State PA Zip Code 16870

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2239408

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 743 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kimberly K. Ritzheimer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 20578 East Buchanan Drive		Transaction ID: 2236482	
City State Zip Code Aurora CO 80011	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Dept. of Defense	Occupation Information Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) B. Ms. Judith Roales		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 20374 Blue Point Dr		Transaction ID: 2234902	
City State Zip Code Rehoboth Bch DE 19971	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer St. Petersburg Times	Occupation Executive V.P. & Gen. Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) C. Ms. Florence D. Roberts		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 801 Valley Road		Transaction ID: 2236471	
City State Zip Code Mason NH 03048	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 744 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Florence D. Roberts

Mailing Address 801 Valley Road

City State Zip Code
Mason NH 03048

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237274

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Florence D. Roberts

Mailing Address 801 Valley Road

City State Zip Code
Mason NH 03048

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237276

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jane A. Robinson

Mailing Address 1844 West 23rd Street
Sunset Island 3

City State Zip Code
Miami Beach FL 33140

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238273

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 745 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine Roeder		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 411 West End Avenue		Transaction ID: 2234425	
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Coldwell Banker	Occupation Real Estate Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Mr. Donald L. Rogers		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2720 Whippoorwill Drive		Transaction ID: 2239285	
City State Zip Code Charleston IL 61920	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Nancy Roll		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 3028 P Street NW		Transaction ID: 2239520	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 1300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Special Education Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 746 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Pam Rolph		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 132 San Felipe Avenue		Transaction ID: 2234580	
City State Zip Code S. San Francisco CA 94080	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Yahoo! Inc.	Occupation Paralegal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Susan D. Romaine		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 7 Conquest Avenue		Transaction ID: 2236131	
City State Zip Code Sullivans IS SC 29482	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Ms. Patricia H Ronald		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1328 Parrott Dr.		Transaction ID: 2239925	
City State Zip Code San Mateo CA 94402	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 747 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marty Rosen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 736 W 187th Street # 505		Transaction ID: 2233615	
City State Zip Code New York NY 10033	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Day2 Inc	Occupation non-profit executive director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Clare Rosenfield		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 4 Crosshill Road		Transaction ID: 2240379	
City State Zip Code Hartsdale NY 10530	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Marjorie B. Roswell		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 3443 Guilford Terrace		Transaction ID: 2233238	
City State Zip Code Baltimore MD 21218	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer UMBC	Occupation Spatial Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 748 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Glenda M. Rothberg		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2007	
Mailing Address 319 Gravilla Street		Transaction ID: 2234583	
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer none Occupation lawyer	Aggregate Year-to-Date ▼ 700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Susan Rothenberg		Date of Receipt M M / D D / Y Y Y Y 04 / 07 / 2007	
Mailing Address 420 12 St H3L		Transaction ID: 2232428	
City State Zip Code Brooklyn NY 11215	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beth israel Medical center Occupation Physician	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Janet D. Rowley		Date of Receipt M M / D D / Y Y Y Y 04 / 26 / 2007	
Mailing Address 5310 S. University Avenue		Transaction ID: 2239766	
City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer U of Chicago Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 749 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr Donald Rubin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 122 East 70th St		Transaction ID: 2232655
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Ms. Shelley Rubin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address 122 East 70 Street		Transaction ID: 2231430
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda K. Rude		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 7
Mailing Address 839 Union St.		Transaction ID: 2234032
City State Zip Code San Francisco CA 94133	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Landscape Designer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	10050.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 750 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. D. Richard Rudolf		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 14674 Sturnella Way		Transaction ID: 2238164	
City State Zip Code Valley Center CA 92082	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Dr. Jane L. Ruehle		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 14000 E. Progress Way		Transaction ID: 2239961	
City State Zip Code Aurora CO 80015	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Ms. Nina K. Rush		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 305 Wildwood Avenue		Transaction ID: 2232869	
City State Zip Code Ann Arbor MI 48103	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Clinical Social Worker Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 751 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marty Russo		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 700 13th Street NW Ste. 400		Transaction ID: 2239436	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Patricia J. Ryan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 17 south Ferris Street		Transaction ID: 2235683	
City State Zip Code Irvington NY 10533	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Freelance writer	Aggregate Year-to-Date ▼ 340.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Parisa Sabeti		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 416 Commonwealth Avenue # 619		Transaction ID: 2236085	
City State Zip Code Boston MA 02215	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 340.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	420.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 752 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy R. Sachs		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 32 Dromara Road		Transaction ID: 2231748	
City State Zip Code Saint Louis MO 63124	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Gallery Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Deborah M. Sale		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 151 West 74 Street, # 9A		Transaction ID: 2231333	
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Hospital for Special Surgery	Occupation Health Care Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00		

Full Name (Last, First, Middle Initial) C. Ms. Ruth Salzman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 800 West End Avenue # 9D		Transaction ID: 2239493	
City State Zip Code New York NY 10025	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 753 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Adelaide Sandler

Mailing Address 4 Far Horizon Lane

City State Zip Code
Sandy Hook CT 06482

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

Name of Employer Occupation
Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2007

Transaction ID: 2238046

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Shirley Santel

Mailing Address 3446 Riverchase Pkwy

City State Zip Code
Saint Charles MO 63301

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

Name of Employer Occupation
Tool Service Center Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2007

Transaction ID: 2233250

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Terry J. Satterlee

Mailing Address 8106 NW Walnut Way

City State Zip Code
Parkville MO 64152

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

Name of Employer Occupation
Lathrope & Gage Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2007

Transaction ID: 2232083

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 754 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sara Saylor Mailing Address 3137 Kaiser Way City State Zip Code Carmichael CA 95608 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7 Transaction ID: 2239279 Amount of Each Receipt this Period 100.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Care Giver/ Homemaker Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Ms. Georgann E Scally Mailing Address 502 Sealight Lane City State Zip Code Redwood City CA 94065 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7 Transaction ID: 2233880 Amount of Each Receipt this Period 250.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Dr. Margaret H Schadler, Ph.D. Mailing Address 4024 Windsor Drive City State Zip Code Niskayuna NY 12309 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Transaction ID: 2231951 Amount of Each Receipt this Period 300.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1600.00	

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 755 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Margaret H Schadler, Ph.D.		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 4024 Windsor Drive		Transaction ID: 2232596	
City Niskayuna	State NY	Zip Code 12309	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00	

Full Name (Last, First, Middle Initial) B. Dr. Margaret H Schadler, Ph.D.		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 4024 Windsor Drive		Transaction ID: 2232582	
City Niskayuna	State NY	Zip Code 12309	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00	

Full Name (Last, First, Middle Initial) C. Ms. Claudia P. Schechter		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 2475 Virginia Avenue NW #900		Transaction ID: 2237386	
City Washington	State DC	Zip Code 20037	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 756 / 1028
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Andrea Harris Scheidt		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 40 East 80 Street		Transaction ID: 2233940	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Kenyon & Kenyon	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Jilliene Schenkel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address P.O. Box 19310		Transaction ID: 2233479	
City State Zip Code Encino CA 91416	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Trustee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Susan Schilperoort		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 3435 Cottontail Lane		Transaction ID: 2240769	
City State Zip Code Ann Arbor MI 48103	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Home		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 757 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lisette A Schmidli		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 3656 Ranch Creek		Transaction ID: 2234429
City State Zip Code Austin TX 78730	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Norma Jean Schmieding		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 51 Rodman Street		Transaction ID: 2240761
City State Zip Code Wakefield RI 02879	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mrs. Anna Mae Schnucker		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 23582 Railroad St		Transaction ID: 2233322
City State Zip Code Parkersburg IA 50665	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 758 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Anna Mae Schnucker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 23582 Railroad St		Transaction ID: 2234921	
City Parkersburg	State IA	Zip Code 50665	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Stanley Schroeder		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 572 Wapiti Loop		Transaction ID: 2235837	
City Hamilton	State MT	Zip Code 59840	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Ms. Elsa N. Schultz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 50 Coe Road, #111		Transaction ID: 2234379	
City Belleair	State FL	Zip Code 33756	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2100.00	

SUBTOTAL of Receipts This Page (optional) ▶	410.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 759 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Pam Schuneman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 809 Oak Pond Drive		Transaction ID: 2234102
City State Zip Code Osprey FL 34229	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kerkering Baberio	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Mrs. Sara L Schupf		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1021 Park Avenue		Transaction ID: 2233624
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Dr. Jean Schwarzbauer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 193 Moore Street		Transaction ID: 2231798
City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Princeton University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 760 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Judith G Scott		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 3501 N. Summit Avenue		Transaction ID: 2234043	
City State Zip Code Shorewood WI 53211		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Robert W. Baird & Co. Inc.		Occupation Investment Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Ms. Michelle P Scott		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 160 E. 38th Street, #26C		Transaction ID: 2239396	
City State Zip Code New York NY 10016		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer East-West Management Institute, Inc.		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2300.00	

C. Full Name (Last, First, Middle Initial) Ms. Susan Scott Stanley		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 151 Avenue B # 4		Transaction ID: 2237987	
City State Zip Code New York NY 10009		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Art Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 761 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Suzanne Seay		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 2571 N. Avenida San Valle		Transaction ID: 2239225
City State Zip Code Tucson AZ 85715	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Financial Planner Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Ms. Suzanne Seay		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 2571 N. Avenida San Valle		Transaction ID: 2240453
City State Zip Code Tucson AZ 85715	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Financial Planner Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan Seidel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 425 East 63rd Street		Transaction ID: 2239397
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Art Dealer Aggregate Year-to-Date ▼ 1400.00	

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 762 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Dorine R. Seidman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 293 Pelican Way		Transaction ID: 2238266
City State Zip Code Delray Beach FL 33483	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self Occupation attorney	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Elizabeth Seifel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 290 Amber Drive		Transaction ID: 2231419
City State Zip Code San Francisco CA 94131	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Elizabeth H. Senf		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1340 Pomeroy Avenue #324		Transaction ID: 2239257
City State Zip Code Santa Clarita CA 95051	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 763 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Prochy P Sethna

Mailing Address 1496 Sierra Ave

City State Zip Code
San Jose CA 95126

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 17 / 2007

Transaction ID: 2233884

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Susan Seymour

Mailing Address 550 W. 12th Street

City State Zip Code
Claremont CA 91711

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

Name of Employer Occupation
Pitzer College Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: 2240557

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Gail M. Shackel

Mailing Address 3211 Point White Drive, N.E.

City State Zip Code
Bainbridge Island WA 98110

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: 2240750

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 764 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Libby Shafer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1756 Vineyard Avenue		Transaction ID: 2237034	
City State Zip Code Saint Helena CA 94574	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Shelley Shanaman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 2936 Waterleaf Drive		Transaction ID: 2234073	
City State Zip Code Germantown TN 38138	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation homemaker	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Janice Shapiro		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 220 Parkwood Avenue		Transaction ID: 2237049	
City State Zip Code Rochester NY 14620	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 765 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Janice Shapiro

Mailing Address 220 Parkwood Avenue

City State Zip Code
Rochester NY 14620

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2007

Transaction ID: 2238492

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Ruth Share

Mailing Address 713 Maple Hill Lane

City State Zip Code
Birmingham MI 48009

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: 2239127

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Esther Shay

Mailing Address 22 Ledge Road
Cottage 69

City State Zip Code
Blue Hill ME 04614

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2007

Transaction ID: 2238597

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 766 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marcia C. Shearer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3 Banner Road		Transaction ID: 2239101	
City State Zip Code Cherry Hill NJ 08003		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Stanley Sheinbaum		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 345 N. Rockingham Avenue		Transaction ID: 2232567	
City State Zip Code Los Angeles CA 90049		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Activist/Economist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mrs. Sylvia C. Sheketoff		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 4989 Pineview Drive		Transaction ID: 2239823	
City State Zip Code Delray Beach FL 33445		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 767 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Beverly Sheldon Mailing Address 9032 Monte Mar Drive City <u>Los Angeles</u> State <u>CA</u> Zip Code <u>90035</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2234514 Amount of Each Receipt this Period <table border="1"> <tr> <td style="text-align: right;">85.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	8		2	0	0	7	85.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	8		2	0	0	7														
85.00																							
Name of Employer Self Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td style="text-align: right;">340.00</td> </tr> </table>	340.00																					
340.00																							

B. Full Name (Last, First, Middle Initial) Ms. Michaelyn K. Shelley-David Mailing Address 248 Walker Dr Apt 1 City <u>Mountain View</u> State <u>CA</u> Zip Code <u>94043</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2234001 Amount of Each Receipt this Period <table border="1"> <tr> <td style="text-align: right;">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	0		2	0	0	7														
100.00																							
Name of Employer IBM Occupation Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td style="text-align: right;">400.00</td> </tr> </table>	400.00																					
400.00																							

C. Full Name (Last, First, Middle Initial) Ms. Deborah F. Shepherd Mailing Address 3581 Clay St City <u>San Francisco</u> State <u>CA</u> Zip Code <u>94118</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2239612 Amount of Each Receipt this Period <table border="1"> <tr> <td style="text-align: right;">500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	6		2	0	0	7	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	6		2	0	0	7														
500.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td style="text-align: right;">500.00</td> </tr> </table>	500.00																					
500.00																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: right;">685.00</td> </tr> </table>	685.00
685.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 768 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Wendy R. Sherman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 6207 Yorkshire Terrace		Transaction ID: 2240744	
City State Zip Code Bethesda MD 20814		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation The Albright Group Inc Principal			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Ms. Susan V. Shipherd		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 10 Saddlehill Road		Transaction ID: 2240423	
City State Zip Code Wynantskill NY 12198		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Krackeler Scientific Sale Rep.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Dr. Elizabeth F Shipley		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 805 Hagys Ford Road		Transaction ID: 2233152	
City State Zip Code Narberth PA 19072		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 769 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Karin Shipman

Mailing Address 1400 Hermann Drive Unit 5H

City State Zip Code
Houston TX 77004

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 26 / 2007

Transaction ID: 2239988

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Barbara L. Short

Mailing Address 1200 Lakeshore Avenue
Apt. 6D

City State Zip Code
Oakland CA 94606

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

Name of Employer Occupation
Self Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: 2239418

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Donna Shrout

Mailing Address 330 Lexington Street

City State Zip Code
San Francisco CA 94110

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

Name of Employer Occupation
HR Specialists Inc Systems Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2007

Transaction ID: 2233581

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 770 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. John Siebert		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address P.O. Box 779		Transaction ID: 2239977
City State Zip Code Morongo Vly CA 92256	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. June Siebert		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 26 Breitmeyer Place		Transaction ID: 2239967
City State Zip Code Mount Clemens MI 48043	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Psychotherapist Aggregate Year-to-Date ▼ 2200.00	

Full Name (Last, First, Middle Initial) C. Ms. Catherine M. Siegel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 2430 N. Lakeview Ave # 15		Transaction ID: 2240544
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Social Worker Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 771 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Myrna Siegel

Mailing Address 1739 Vineyard Trail

City State Zip Code
Annapolis MD 21401

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 0 7

Transaction ID: 2232097

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Jeannine Bouillier Siegmond

Mailing Address 2266 Cherry Hill Road

City State Zip Code
Palmerton PA 18071

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2234513

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Ms. Jeannine Bouillier Siegmond

Mailing Address 2266 Cherry Hill Road

City State Zip Code
Palmerton PA 18071

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237390

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) 375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 772 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sandra Simon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address 1800 NE 114th St Ap		Transaction ID: 2233811	
City State Zip Code Miami FL 33181	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Hildred Simons		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 206 Conant Road		Transaction ID: 2239199	
City State Zip Code Weston MA 02493	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Mr. Michael A Simpson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 10 Somerset Place		Transaction ID: 2232312	
City State Zip Code Wilmington MA 01887	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mellon Financial Corp Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Accounting Manager Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 773 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Adelaide A. Sink		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address PO Box 219 11106 Old Fort Trail		Transaction ID: 2231741
City Thonotosassa State FL Zip Code 33592	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Lisa Sloat		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 1 Grove Isle Drive #1603		Transaction ID: 2237351
City Miami State FL Zip Code 33133	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Citibank/Bush-Klein Realty Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Banker/RE Broker Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Christine A. Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address P.O. Box 3888		Transaction ID: 2232145
City La Mesa State CA Zip Code 91944	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Central Dupage Hospital Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Nurse Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 774 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Edgar Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address P.O. Box 989 731 Marina Street		Transaction ID: 2232271
City Morro Bay State CA Zip Code 93443	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 235.80	

Full Name (Last, First, Middle Initial) B. Ms. Joan Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 2661 Key Largo Lane		Transaction ID: 2238131
City Fort Lauderdale State FL Zip Code 33312	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. June B Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 3915 Carolina Street		Transaction ID: 2238823
City San Pedro State CA Zip Code 90731	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LACCD Harbor College Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation professor Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	515.00
TOTAL This Period (last page this line number only)	(Empty box)

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

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

FOR LINE NUMBER: PAGE 775 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Laura W. Smith

Mailing Address 2575 Peachtree Road # 18E

City State Zip Code
Atlanta GA 30305

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: 2232786

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Margaret Smith

Mailing Address 1706 Ryan Avenue W.

City State Zip Code
Roseville MN 55113

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: 2239136

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Michelle Smith

Mailing Address 3537 Stratford Road

City State Zip Code
Wantagh NY 11793

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

Name of Employer Occupation
Barnes & Noble, Inc. VP, Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 27 / 2007

Transaction ID: 2240376

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 776 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Polly P Smith		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 307 East 12th Street #4B		Transaction ID: 2233961	
City State Zip Code New York City NY 10003		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Freelance Costume Designer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00	

B. Full Name (Last, First, Middle Initial) Ms. Rheta R. Smith		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 2223 Pine Street		Transaction ID: 2240345	
City State Zip Code Philadelphia PA 19103		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Freelance Classical Musician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

C. Full Name (Last, First, Middle Initial) Dr. Robert E Smith		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 400 Holt Road		Transaction ID: 2236421	
City State Zip Code Highlands NC 28741		Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Educator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 777 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Terry N. Smith

Mailing Address 2311 Vistamont Drive

City State Zip Code
Decatur GA 30033

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239825

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Frances H. Snedeker

Mailing Address 20 Linden Ave

City State Zip Code
Larchmont NY 10538

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2234538

Amount of Each Receipt this Period
16.50

C. Full Name (Last, First, Middle Initial)
Ms. Tonya Snyder

Mailing Address 8088 River Road Pike

City State Zip Code
Nashville TN 37209

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

Name of Employer Occupation
Vanderbilt University Medical Technologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239824

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	366.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 778 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Carol S. Solomon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7	
Mailing Address 12397 Sea Pines Dr		Transaction ID: 2231500	
City State Zip Code Dewitt MI 48820		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer McLaren Health Care Corp		Occupation Health Care Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Ms. Kathryn Sorenson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 13200 SW 69th Avenue		Transaction ID: 2238268	
City State Zip Code Miami FL 33156		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Miami-Dade County		Occupation County Commissioner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ms. Elsie F. Sorgenfrei		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 21120 Dubuque Road		Transaction ID: 2233249	
City State Zip Code Snohomish WA 98290		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 779 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Barbara C Sorkin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 6760 Kenwood Forest Lane		Transaction ID: 2234769	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DHHS/NIH	Occupation Scientist/Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) B. Mrs. Viola Spalding		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 43641 Henson Road		Transaction ID: 2237249	
City State Zip Code Hempstead TX 77445	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2350.00		

Full Name (Last, First, Middle Initial) C. Ms. Gail Spane		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 1101 G Street SE		Transaction ID: 2240374	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation TAX ADVISOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.00		

SUBTOTAL of Receipts This Page (optional) ▶	1330.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 780 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gail Spane		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 1101 G Street SE		Transaction ID: 2240810	
City State Zip Code Washington DC 20003		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation TAX ADVISOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1450.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Sparks		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1096 Mullica Hill Road		Transaction ID: 2234185	
City State Zip Code Mullica Hill NJ 08062		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Cephalon Inc Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Ms. Alice W. Specht		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 918 Grand Avenue		Transaction ID: 2234859	
City State Zip Code Abilene TX 79605		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Hardin-Simmons University Occupation Librarian			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional) ▶	685.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 781 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Janet T. Spence		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address P.O. Box 465		Transaction ID: 2239410	
City Dennis	State MA	Zip Code 02638	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Retired Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Mr. John O. Sponsler		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address PO Box 145		Transaction ID: 2233225	
City north baltimore	State OH	Zip Code 45872	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Ann L Sprague		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 3445 W. Foxes Den Dr.		Transaction ID: 2233999	
City Tucson	State AZ	Zip Code 85745	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer University of Arizona Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Scientist Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 782 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Duane C. Priestersbach		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 2 Longview Knoll NE		Transaction ID: 2238546
City State Zip Code Iowa City IA 52240	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Mrs. Erica L. Springstead		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 600 Hudson Place		Transaction ID: 2233617
City State Zip Code Port Townsend WA 98368	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Home Engineer Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Ms. Mae Stadler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 28 Bretano Way		Transaction ID: 2236375
City State Zip Code Greenbrae CA 94904	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 783 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Miriam E. Stahl

Mailing Address 503 E. Washington Street

City State Zip Code
Macomb IL 61455

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240547

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Ronald K Stair

Mailing Address 1 Tennessee Court

City State Zip Code
Port Jeff Station NY 11776

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

Name of Employer Occupation
Creative Plan Designs, Lt-d. Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 7 / 2 0 0 7

Transaction ID: 2233888

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Ronna S. Stamm

Mailing Address 1126 Michigan Avenue

City State Zip Code
Evanston IL 60202

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232845

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 784 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. John B. Stearns		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 73 Margin Street, Apt. T1		Transaction ID: 2232258
City State Zip Code Peabody MA 01960	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. John B. Stearns		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 73 Margin Street, Apt. T1		Transaction ID: 2236582
City State Zip Code Peabody MA 01960	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Dee Stegman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 15 Reily Rd		Transaction ID: 2236922
City State Zip Code Cincinnati OH 45215	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Real Estate	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 785 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Adrienne Stein

Mailing Address 4026 Winkle Avenue

City State Zip Code
Santa Cruz CA 95065

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: 2232583

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Jane Stein

Mailing Address 222 Vance Street

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
Self Educator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237398

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Robert A. Stein

Mailing Address 3040 Grand Bay Blvd.
Unit 216

City State Zip Code
Longboat Key FL 34228

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: 2232588

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 786 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Kenneth Steiner		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 14 Stoner Avenue Apt. 2M		Transaction ID: 2232351	
City State Zip Code Great Neck NY 11021	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Private Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Gail R Stephens		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 4 Santa Lucia		Transaction ID: 2234381	
City State Zip Code Orinda CA 94563	Amount of Each Receipt this Period 2200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Ms. Judith H. Sterling		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 4932 Crestwood Drive		Transaction ID: 2236255	
City State Zip Code Waco TX 76710	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional) ▶	2490.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 787 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth Stifel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 2979 Clearview Road		Transaction ID: 2239648	
City State Zip Code Allison Park PA 15101	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer West Penn Allegheny Health	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Doris Stillman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 125 56th Avenue, S. Apt. 33		Transaction ID: 2240008	
City State Zip Code St. Petersburg FL 33705	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Ms. Cynthia Stivers		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 308 West 103rd Street, # 111		Transaction ID: 2237365	
City State Zip Code New York NY 10025	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Martha Stewart Living Omnimedia	Occupation Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 788 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. William L. Stockton

Mailing Address 458 W 146th St Apt

City State Zip Code
New York NY 10031

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

Name of Employer Occupation
Peutsche Bank Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2007

Transaction ID: 2240191

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Antonia E. Stolper

Mailing Address Shearman & Sterling
599 Lexington Ave. C2

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Shearman & Sterling Lawyer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 26 / 2007

Transaction ID: 2240006

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Jessie M Stone

Mailing Address 1635 Navellier St

City State Zip Code
El Cerrito CA 94530

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

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2007

Transaction ID: 2239505

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 789 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda K. Stone		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1509 Dickinson Road		Transaction ID: 2239394
City State Zip Code Havertown PA 19083	Amount of Each Receipt this Period 650.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Towers Perrin	Occupation Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Tracy Stone		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 2041 Blake Ave		Transaction ID: 2234729
City State Zip Code Los Angeles CA 90039	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Ms. Meredith L Stout		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 340 Vermont Ave.		Transaction ID: 2238800
City State Zip Code Berkeley CA 94707	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Photographer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1735.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 790 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Barbara S. Stowe		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 11507 Woodstock Way		Transaction ID: 2239918	
City State Zip Code Reston VA 20194	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 3300.00	

Full Name (Last, First, Middle Initial) B. Ms. Therese StPeter		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 3423 Stoneybrook Drive		Transaction ID: 2233881	
City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation manager	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Christine S. Strain		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 404 Arnett Avenue		Transaction ID: 2232902	
City State Zip Code Ventura CA 93003	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 791 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Robert A. Strauss

Mailing Address 1611 North Wilmot
Suite 108A

City State Zip Code
Tucson AZ 85712

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

Name of Employer Occupation
Strauss Foundation President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2007

Transaction ID: 2238758

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Celia J. Stuart-Powles

Mailing Address 3610 E. 24th Street

City State Zip Code
Tulsa OK 74114

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

Name of Employer Occupation
Fluor Daniel Wms. Bros. Electrical Designer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2007

Transaction ID: 2235070

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Ms. Miriam F. Sukernek

Mailing Address 111 Birdsong Way Apt E312

City State Zip Code
Hilton Head SC 29926

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

Name of Employer Occupation
Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2007

Transaction ID: 2238345

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2085.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 792 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara B. Sullivan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 264 St. Andrews		Transaction ID: 2233245
City State Zip Code St. Simons Island GA 31522	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Paula Susemichel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 5703 Broadway Street		Transaction ID: 2233887
City State Zip Code Indianapolis IN 46220	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation DPS, Inc. IT Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Pamela K Sutherland		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 2747 E. Third Street		Transaction ID: 2234394
City State Zip Code Tucson AZ 85716	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Arizona List/self Executive Director/lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 793 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Evelyn J. Swenson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 204 Walnut Avenue North		Transaction ID: 2239059
City State Zip Code Canby MN 56220	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. I. Davidson Swift		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 3146 Q Street NW		Transaction ID: 2233483
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Editorial Director Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary H. D. Swift		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 33195 Millville Road		Transaction ID: 2240436
City State Zip Code Upperville VA 20184	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 794 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet Switzer, Ph.D.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4444 Via Pinzon		Transaction ID: 2238676	
City State Zip Code Palos Verdes Ests CA 90274		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Ruth Sylwester		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 2027 Coventry Way		Transaction ID: 2234829	
City State Zip Code Eugene OR 97405		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Ms. Anne D. Taft		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 38 Oakridge Drive		Transaction ID: 2238788	
City State Zip Code Binghamton NY 13903		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Investor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5185.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 795 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Deborah Tannen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 700 Live Oak Dr		Transaction ID: 2237382
City State Zip Code Mc Lean VA 22101	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Georgetown University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dr. Priscilla W Tate		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 6612 Meadowpark Ct.		Transaction ID: 2234891
City State Zip Code Benbrook TX 76132	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Penelope A. Taylor		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1643 Seascape Blvd.		Transaction ID: 2234957
City State Zip Code Aptos CA 95003	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional) ▶	1185.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 796 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol J Teal		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 3109 Cartwright Dr.		Transaction ID: 2232807	
City State Zip Code Raleigh NC 27612		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Lillian's List of NC Executive Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 986.00	

Full Name (Last, First, Middle Initial) B. Ms. Carol J Teal		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 3109 Cartwright Dr.		Transaction ID: 2234850	
City State Zip Code Raleigh NC 27612		Amount of Each Receipt this Period 84.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Lillian's List of NC Executive Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 986.00	

Full Name (Last, First, Middle Initial) C. Ms. Judy E. Tenney		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 845 Forest Avenue		Transaction ID: 2231401	
City State Zip Code Rye NY 10580		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	634.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 797 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Shirley T. Thatcher

Mailing Address 3663 Thorn Road

City State Zip Code
Sebastopol CA 95472

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1040.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2234561

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Ms. Shirley T. Thatcher

Mailing Address 3663 Thorn Road

City State Zip Code
Sebastopol CA 95472

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1040.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238763

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Bernard Theisen

Mailing Address 1404 Kensington Rd

City State Zip Code
Grosse Pointe Park MI 48230

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

Name of Employer Occupation
Legal Aid and Defenders Association Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240615

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	1110.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 798 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sharon Melissa Thomashow

Mailing Address 518 12th Street Apt. 1L

City State Zip Code
Brooklyn NY 11215

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

Name of Employer Self Occupation Tour Guide

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239747

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. William Thornton

Mailing Address 8 Windsor Place

City State Zip Code
Mebane NC 27302

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2238538

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Frances Tibbits

Mailing Address P.O. Box 205

City State Zip Code
Pacific Palisades CA 90272

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2233939

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 799 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Grace W Tiessen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 714 Prospect Blvd		Transaction ID: 2234516	
City State Zip Code Pasadena CA 91103	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Ms. Johanna Tilbury		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address PO Box 2595		Transaction ID: 2234581	
City State Zip Code Kamuela HI 96743	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) C. Ms. Maria R. Tindall		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7	
Mailing Address 627 Catalina Drive		Transaction ID: 2231555	
City State Zip Code Livermore CA 94550	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1750.00		

SUBTOTAL of Receipts This Page (optional) ▶	390.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 800 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Linda Toeniskoetter

Mailing Address 25570 Firhaven Lane

City State Zip Code
Los Gatos CA 95033

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

Name of Employer Self Occupation Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2234430

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Mary Tovell

Mailing Address 57 Charlemont Street

City State Zip Code
Newton Hlds MA 02461

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234304

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Marcia K Townley

Mailing Address 10 East 70th Street, #2D

City State Zip Code
New York NY 10021

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 2234420

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 801 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet E Traub		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1229 Stanyan Street		Transaction ID: 2237238	
City State Zip Code San Francisco CA 94117	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Investor	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Barbara K. Traum		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 7325 Heritage Palms Estate Dr		Transaction ID: 2234787	
City State Zip Code Fort Myers FL 33912	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Student	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Phyllis Triple		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 549 W. 123rd Street, Apt. 21C		Transaction ID: 2239256	
City State Zip Code New York NY 10027	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Union Theological Seminary Occupation Professor	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 802 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Aileen Trix		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 293 Moss Creek Dr		Transaction ID: 2240326	
City State Zip Code Hilton Head SC 29926	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Ruth Trubner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 919 109th Avenue NE Apt. 1208		Transaction ID: 2240454	
City State Zip Code Bellevue WA 98004	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Dr. Molly B Turlish		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 7	
Mailing Address 1070 Beacon Street #5C		Transaction ID: 2233965	
City State Zip Code Brookline MA 02446	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation consultant	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 803 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary L. Tyndall		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 18 Crawford Street		Transaction ID: 2239280	
City State Zip Code Rochester NY 14620	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Katharine A Uhle		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 2010 Stanley		Transaction ID: 2238541	
City State Zip Code Ann Arbor MI 48104	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Ms. Margaret H Upton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 5776 Valente Pl		Transaction ID: 2239344	
City State Zip Code Sarasota FL 34238	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 804 / 1028
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cristina Uribe		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 4212 26th Street Unit A		Transaction ID: 2234374	
City State Zip Code San Francisco CA 94131		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer EMILY's List		Occupation Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. Marion L. Usher		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 2021 Hillyer Place NW		Transaction ID: 2231375	
City State Zip Code Washington DC 20009		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Shirley Valk		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 142 Birdsong Way		Transaction ID: 2240426	
City State Zip Code Hilton Head Island SC 29926		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self		Occupation Interior Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 805 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marjorie E. Vanek		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 10241 York Road		Transaction ID: 2240397	
City N. Royalton	State OH	Amount of Each Receipt this Period 100.00	
Zip Code 44133		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Margaret E. VanGundy		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 1176 Lagonda Avenue		Transaction ID: 2235083	
City Springfield	State OH	Amount of Each Receipt this Period 85.00	
Zip Code 45503		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00	
Name of Employer Occupation Retired		Amount of Each Receipt this Period 85.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Ms. Marta VanLoan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 930 W. Arlington Street		Transaction ID: 2234013	
City Martinez	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94553		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Occupation US Dept. Agriculture Scientist		Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	285.00
TOTAL This Period (last page this line number only) ▶	285.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 806 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Selee Vappi		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 2111 East Alameda Avenue		Transaction ID: 2240022	
City State Zip Code Denver CO 80209	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Lillian Vardy		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 161 E. Chicago Avenue Apt. 50A		Transaction ID: 2238384	
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Daphne Vaughan		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 2403 Sweetbrush Drive		Transaction ID: 2239665	
City State Zip Code Austin TX 78703	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 807 / 1028
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sally S. Venerable		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 5000 SW 25th Blvd. #1105		Transaction ID: 2238247	
City State Zip Code Gainesville FL 32608	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1000.00		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired		

Full Name (Last, First, Middle Initial) B. Ms. Mary Jane Volk		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 541 E Nelson Avenue		Transaction ID: 2233958	
City State Zip Code Alexandria VA 22301	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 250.00		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consultant		

Full Name (Last, First, Middle Initial) C. Ms. Linda B. Walker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2931 Albans Road		Transaction ID: 2239356	
City State Zip Code Houston TX 77005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1000.00		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Investor		

SUBTOTAL of Receipts This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 808 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Bonnie Wallace-Hoffman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 3065 70th Avenue SE		Transaction ID: 2232901	
City State Zip Code Mercer Island WA 98040	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00	

B. Full Name (Last, First, Middle Initial) Ms. Bonnie Wallace-Hoffman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 3065 70th Avenue SE		Transaction ID: 2237327	
City State Zip Code Mercer Island WA 98040	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00	

C. Full Name (Last, First, Middle Initial) Ms. Ann Walraven		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 209 Menlo Park Road		Transaction ID: 2235447	
City State Zip Code Schenectady NY 12309	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional) ▶	435.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 809 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carolyn F. Walton

Mailing Address 2579 North Common Drive

City Fayetteville State AR Zip Code 72703

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: 2239463

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Candace Walworth

Mailing Address 8 Manning Avenue

City Lewiston State ME Zip Code 04240

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

Name of Employer Self Occupation MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 0 7

Transaction ID: 2232084

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Ann Wansley

Mailing Address 51 Chula Lane

City San Francisco State CA Zip Code 94114

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231360

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 810 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia G. Ward

Mailing Address 412 Stanley Drive

City State Zip Code
Santa Barbara CA 93105

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2007

Transaction ID: 2234851

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Jean Martin Warholic

Mailing Address 280 Ringwood Road

City State Zip Code
Freeville NY 13068

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2007

Transaction ID: 2232680

Amount of Each Receipt this Period
111.00

C. Full Name (Last, First, Middle Initial)
Ms. Christina L. Warren

Mailing Address 20 Skyline Road

City State Zip Code
San Anselmo CA 94960

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

Name of Employer Occupation
County of Marin Project Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2007

Transaction ID: 2240214

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	461.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 811 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Helene R. Warrenner

Mailing Address 3939 Erie Avenue # 502

City State Zip Code
Cincinnati OH 45208

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: 2232554

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Helene R. Warrenner

Mailing Address 3939 Erie Avenue # 502

City State Zip Code
Cincinnati OH 45208

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240729

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Judith N. Wasserheit

Mailing Address 6666 NE 60th Street

City State Zip Code
Seattle WA 98115

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

Name of Employer Occupation
FHCRC Researcher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240754

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 812 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Catherine Watson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address P.O. Box 914		Transaction ID: 2237058	
City State Zip Code Penney Farms FL 32079	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Martha J Watson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 1209 Villa St.		Transaction ID: 2239491	
City State Zip Code Mountain View CA 94041	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed Occupation Env. Engineer	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Watts		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 520 Montecillo Rd		Transaction ID: 2239652	
City State Zip Code San Rafael CA 94903	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Writer	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 813 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Vera Weaver		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 734 Clark Crossing, S.E.		Transaction ID: 2238530
City State Zip Code Grand Rapids MI 49506	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Marcia D. Weber		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 138 West Hill Terrace		Transaction ID: 2238748
City State Zip Code Painted Post NY 14870	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation STC Planning Board Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. Dr. Margaret L. Weber-Levine		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 373 Sargent Drive SE		Transaction ID: 2231394
City State Zip Code Atlanta GA 30315	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Morehouse College Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	3750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 814 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Debra S. Weinberg		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 601 E. Pratt Street 6th Floor		Transaction ID: 2240730
City State Zip Code Baltimore MD 21202	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Associated Jwsh. Cmm. Fedtrn.	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Eleanor Weinstock		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 525 South Flagler Drive Apt. 12c		Transaction ID: 2237452
City State Zip Code West Palm Beach FL 33401	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer		Occupation Housewife
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan Weir		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 2 Larchwood Drive		Transaction ID: 2240238
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Joslin Diabetes Center		Occupation Scientist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 815 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cornelia Weiss		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address PO Box 770106		Transaction ID: 2233173
City State Zip Code Steamboat Spr CO 80477	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Weiss Law Firm L.L.C.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Dolores Welty		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 2076 Sheridan Road		Transaction ID: 2239946
City State Zip Code Encinitas CA 92024	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer		Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mrs. Eugenie Werbel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 2608A Peter Street		Transaction ID: 2240723
City State Zip Code Honolulu HI 96816	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer		Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1550.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 816 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lucille Werlinich		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 18 Ponds Lane		Transaction ID: 2238798
City State Zip Code Purchase NY 10577	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Joseph C Abeles	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Bruce Wertheimer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address PO Box 2300		Transaction ID: 2233240
City State Zip Code Sarasota FL 34230	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. M. Patricia West		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 2134 Spring Street		Transaction ID: 2232811
City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Public health	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 817 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Stephany Westhusin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 1171 Harper Lake Drive		Transaction ID: 2240360	
City State Zip Code Louisville CO 80027	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. John Wetzel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1601 Lakeside Drive Unit A		Transaction ID: 2237558	
City State Zip Code Champaign IL 61821	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Henrietta Wexler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4450 S Park Ave APT 1207		Transaction ID: 2234421	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 818 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Lyle Whitcomb

Mailing Address 4580 Klahanie Drive SE
STE 193

City Issaquah State WA Zip Code 98029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 2233092

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Martha White

Mailing Address 193 Vinal Street
PO Box 954

City Rockport State ME Zip Code 04856

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer/editor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2233929

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Pam White

Mailing Address 10 Dakin Road

City Sharon State CT Zip Code 06069

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233609

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 819 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lt. Col. Marty Whitehead		Date of Receipt M M / D D / Y Y Y Y 04 / 09 / 2007	
Mailing Address P.O. Box 90929		Transaction ID: 2232442	
City San Antonio	State TX	Zip Code 78209	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Ms. Linda Hall Whitman		Date of Receipt M M / D D / Y Y Y Y 04 / 20 / 2007	
Mailing Address 3620 Eileen Street		Transaction ID: 2234228	
City Maple Plain	State MN	Zip Code 55359	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Ms. Lois Whitman		Date of Receipt M M / D D / Y Y Y Y 04 / 20 / 2007	
Mailing Address 285 Central Park West		Transaction ID: 2233557	
City New York	State NY	Zip Code 10024	Amount of Each Receipt this Period 4000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Human Rights Watch Occupation Lawyer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5250.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 820 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Billie L. Whittaker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1018 Lavender Place		Transaction ID: 2234444
City Hercules State CA Zip Code 94547	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Mrs. Billie L. Whittaker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 7
Mailing Address 1018 Lavender Place		Transaction ID: 2233937
City Hercules State CA Zip Code 94547	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Martha Whittaker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 4462 Machado Drive		Transaction ID: 2232580
City Concord State CA Zip Code 94521	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer State of California Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Librarian Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 821 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ellen M. Widiss		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 316 Kimball Road		Transaction ID: 2234424	
City State Zip Code Iowa City IA 52245	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Teresa L Wilde		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 4847 Alminar Avenue		Transaction ID: 2235036	
City State Zip Code La Canada CA 91011	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Banker	Aggregate Year-to-Date ▼ 700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Nancy G Wilds		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1305 Windsor Point Rd.		Transaction ID: 2237403	
City State Zip Code Norfolk VA 23509	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 822 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cheryl Wilfong		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 314 Partridge Road		Transaction ID: 2232426	
City State Zip Code E Dummerston VT 05346	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Leslie S. Wilkes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 4094 Maestic Lane # 235		Transaction ID: 2237257	
City State Zip Code Fairfax VA 22033	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Ms. Elaine M. Will		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1570 Lexington Avenue		Transaction ID: 2239960	
City State Zip Code San Mateo CA 94402	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 823 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen L Williams		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 141 Stonegate Rd		Transaction ID: 2237387	
City State Zip Code Portola Valley CA 94028	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Mary B. Williams		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address 205 S Bethel Street		Transaction ID: 2233780	
City State Zip Code Thomaston GA 30286	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of Delaware	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Donna L. Williamson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 52 Nace Avenue		Transaction ID: 2236489	
City State Zip Code Piedmont CA 94611	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

SUBTOTAL of Receipts This Page (optional) ▶	1335.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 824 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Donna L. Williamson Mailing Address 52 Nace Avenue City Piedmont State CA Zip Code 94611 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2237255 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	3		2	0	0	7														
100.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>440.00</td> </tr> </table>	440.00																					
440.00																							

B. Full Name (Last, First, Middle Initial) Ms. Robin Wink Mailing Address 106 E Custis Ave City Alexandria State VA Zip Code 22301 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231542 Amount of Each Receipt this Period <table border="1"> <tr> <td>150.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	3		2	0	0	7	150.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	3		2	0	0	7														
150.00																							
Name of Employer Dept of Justice Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																					
250.00																							

C. Full Name (Last, First, Middle Initial) Ms. Clare Shy Winter Mailing Address 43693 Old Troon Court City Indio State CA Zip Code 92201 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2239140 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	0	7	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	5		2	0	0	7														
250.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																					
250.00																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00
500.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 825 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Kathy Wisnicki		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 6910 Wildlife Rd.		Transaction ID: 2233209	
City State Zip Code Malibu CA 90265		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Santa Monica Malibu Unified School Dis School Board Member			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Ms. Merrie Witkin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 58 W. 15th Street, Apt. 4		Transaction ID: 2239114	
City State Zip Code New York NY 10011		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Carole J Witt		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 402 Harrison Place		Transaction ID: 2236537	
City State Zip Code Ambler PA 19002		Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	565.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 826 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marjorie W. Witting

Mailing Address 7116 Fort Hunt Rd Apt 387

City State Zip Code
Alexandria VA 22307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 20 / 2007

Transaction ID: 2236946

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Susan D. Wittshire

Mailing Address 77 Fox Run Road

City State Zip Code
South Hamilton MA 01982

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2007

Transaction ID: 2234375

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Agnes S. Wolf

Mailing Address 1057 Rocky Run Road

City State Zip Code
McLean VA 22102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2950.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: 2239395

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 827 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elaine S. Wolf		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1015 South 6th Street		Transaction ID: 2240570
City State Zip Code Albion NE 68620	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Peter Wolff		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 321 Green Way		Transaction ID: 2238744
City State Zip Code Wayland MA 01778	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Mr. F. Robert Wollaeger		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 311 Peck Street		Transaction ID: 2233371
City State Zip Code Sault S. Marie MI 49783	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 828 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Janice H. Woodcock		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 42 Braeland Avenue		Transaction ID: 2239393	
City State Zip Code Newton Center MA 02459		Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Artist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

B. Full Name (Last, First, Middle Initial) Mr. Parker Worley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1979 Route 70 East Brighton Gardens Apt. 216		Transaction ID: 2239330	
City State Zip Code Cherry Hill NJ 08003		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Ms. Suzie Wrenn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 7319 Desert Ridge Glen		Transaction ID: 2233975	
City State Zip Code Bradenton FL 34202		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 829 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathryn S. Wroblewski		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 74 Freemont Road		Transaction ID: 2239200
City State Zip Code Rochester NY 14612	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Jeanne W. Yozell		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 56 Ridgeway Road		Transaction ID: 2238246
City State Zip Code Weston MA 02493	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Clinical Social Worker Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Joelle Yuna		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 280 Oak Tree Drive		Transaction ID: 2233898
City State Zip Code Santa Rosa CA 95401	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 830 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laurie Ann Zastrow		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 26 School Street, Apt. 2		Transaction ID: 2240451
City Hull State MA Zip Code 02045	Amount of Each Receipt this Period 115.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Social Security Adm Occupation District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Ms. Marcia W. Zech		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 3041 60th Avenue S.E.		Transaction ID: 2231425
City Mercer Island State WA Zip Code 98040	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Amy Zellerbach		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 100 Spear Street Suite 1510		Transaction ID: 2239353
City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer EMILY's List Occupation Director, Majority Council		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	3615.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 831 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sharon Zemel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 903 Summit Drive		Transaction ID: 2233604	
City State Zip Code Wexford PA 15090	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Children's Institute	Occupation pediatrician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Dr. Charlotte T Zietlow		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 213 S. Bryan		Transaction ID: 2232399	
City State Zip Code Bloomington IN 47408	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Middle Way House, Inc.	Occupation economic development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mrs. Cynthia S. Zimmer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1501 Harbor Court		Transaction ID: 2238615	
City State Zip Code Fort Myers FL 33908	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 832 / 1028						
	(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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Don Zinman Mailing Address PO Box 6707 City Malibu State CA Zip Code 90264 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2240507 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">300.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	7	300.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	4		3	0		2	0	0	7															
300.00																								
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">300.00</td> </tr> </table>		300.00																						
300.00																								

B. Full Name (Last, First, Middle Initial) Ms. Miriam Zolan Mailing Address 1327 Sheridan Rd City Bloomington State IN Zip Code 47401 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2238255 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">1500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	6		2	0	0	7	1500.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	4		2	6		2	0	0	7															
1500.00																								
Name of Employer Occupation Indiana University Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">1500.00</td> </tr> </table>		1500.00																						
1500.00																								

C. Full Name (Last, First, Middle Initial) Ms. Judy Lane Mailing Address 114 Dennis Whitney Road City Oakham State MA Zip Code 01068 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2233649 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">50.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	8		2	0	0	7	50.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	4		1	8		2	0	0	7															
50.00																								
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">0.00</td> </tr> </table>		0.00		Carol Shea-Porter Contrib- utions [MEMO ITEM] MEMO																				
0.00																								

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 833 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Lily Eskelsen Mailing Address 1819 19th Street NW Apt. 2 City Washington State DC Zip Code 20009 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231836 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	4		2	0	0	7														
100.00																							
Name of Employer National Education Assoc Occupation Educator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Mr. Arnold S. Wajenberg Mailing Address 240 Donald Drive City Goffstown State NH Zip Code 03045 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2232308 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	6		2	0	0	7														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Margaret T. Henney Mailing Address 4212 Queensbury Road City Hyattsville State MD Zip Code 20781 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2233936 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	0		2	0	0	7														
100.00																							
Name of Employer walker/seal co's Occupation electrician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 834 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Alma Klinetsky		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 500 S Ocean Blvd Ph		Transaction ID: 2232281	
City State Zip Code Boca Raton FL 33432	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation REQUESTED	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Sarah Bruno		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 2000 Connecticut Ave., NW Apt. 212		Transaction ID: 2233588	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Fundraiser	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Mrs. Carol Bradley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 67 Richboro Road		Transaction ID: 2237487	
City State Zip Code Newton PA 18940	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation DP Analyst	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 835 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Lois M Sturm Mailing Address 628 East 14th Street #6 City State Zip Code New York NY 10009 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: 2232801 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Sullivan & Cromwell LLP legal secretary Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Joan Jessop Brewster Mailing Address 242 Rivermead Rd City State Zip Code Peterborough NH 03458 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Transaction ID: 2240800 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Katherine A. Kent Mailing Address 179 Sea Hammock Way City State Zip Code Ponte Vedra FL 32082 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Transaction ID: 2231892 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 836 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Betty Sancier		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 2715 East Park Place		Transaction ID: 2231879	
City State Zip Code Milwaukee WI 53211	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mrs. Judith Rystar		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 4893 N. Goldwood Terrace		Transaction ID: 2237520	
City State Zip Code Beverly Hills FL 34465	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Marjorie E James		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 14416 Tanglewood Dr.		Transaction ID: 2231782	
City State Zip Code Farmers Branch TX 75234	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 837 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Louise P. Saltzman

Mailing Address 760 Bronson Lane

City Highland Park State IL Zip Code 60035

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Clinical Social Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232393

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Betty Lattie

Mailing Address PO Box 2050

City Waldport State OR Zip Code 97394

FEC ID number of contributing federal political committee. **C**

Name of Employer Wells Fargo Occupation Bank Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237517

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Nancy J. Hirzel

Mailing Address PO Box 2402

City Abbeville State LA Zip Code 70511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232923

Amount of Each Receipt this Period
25.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 838 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Charlotte Olmsted

Mailing Address PO Box 587

City Woods Hole State MA Zip Code 02543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
04 / 16 / 2007

Transaction ID: 2233359

Amount of Each Receipt this Period
30.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Cecily Clark

Mailing Address 75 Pork Hill

City Ossipee State NH Zip Code 03864

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Sculptor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
04 / 11 / 2007

Transaction ID: 2232951

Amount of Each Receipt this Period
500.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Bennett

Mailing Address 263 Dos Brazos Street

City Los Alamos State NM Zip Code 87544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
04 / 20 / 2007

Transaction ID: 2234109

Amount of Each Receipt this Period
25.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 839 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Shirley D. Kirkland

Mailing Address 17 E. 84th Street

City State Zip Code
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 2234004

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Michael A Simpson

Mailing Address 10 Somerset Place

City State Zip Code
Wilmington MA 01887

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mellon Financial Corp Accounting Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232310

Amount of Each Receipt this Period
500.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Nancy Allison

Mailing Address 137 E. 19th Street # 1

City State Zip Code
New York NY 10003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232963

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 840 / 1028
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Luann Wilkins Abrahams Mailing Address 45 Walnut Street City Somerville State MA Zip Code 02143 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231788 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	4		2	0	0	7														
100.00																							
Name of Employer Harvard University Art Museums Occupation Museum Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Mrs. Merrilee A. Cate Mailing Address 4505 N. O'Connor Road City Irving State TX Zip Code 75062 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2237465 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	7	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	3		2	0	0	7														
50.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Mr. Hal C. Reed Mailing Address 144 Orchard Hill Drive City South Windsor State CT Zip Code 06074 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2232433 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	7		2	0	0	7	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	7		2	0	0	7														
50.00																							
Name of Employer University of Connecticut Foundation Occupation Development Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 841 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Diana Bain		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 2657 Hemenway Road		Transaction ID: 2232955	
City State Zip Code Bridport VT 05734		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation EMC Computer Programmer		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Dr. Charlotte T Zietlow		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 213 S. Bryan		Transaction ID: 2232398	
City State Zip Code Bloomington IN 47408		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Middle Way House, Inc. economic development		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Edith Hersher		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 212 Beers Road		Transaction ID: 2237483	
City State Zip Code Easton CT 06612		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 842 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Alice Robinson

Mailing Address 85 Grove Street #212

City State Zip Code
Wellesley MA 02482

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231804

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contrib-
utions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Julia Field

Mailing Address 180 Berkeley Place

City State Zip Code
Brooklyn NY 11217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2007

Transaction ID: 2237431

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contrib-
utions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Elizabeth T. Boris

Mailing Address 3516 Duff Drive

City State Zip Code
Falls Church VA 22041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Urban Institute Research

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232382

Amount of Each Receipt this Period
250.00

Carol Shea-Porter Contrib-
utions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 843 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Eula Lee West		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 26 Calle Cal		Transaction ID: 2240781	
City State Zip Code Santa Fe NM 87508		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Mr. George W. Ranney		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 91 Prospect Street		Transaction ID: 2232404	
City State Zip Code Port Chester NY 10573		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation NYS Tax Auditor		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mr. James Douglas		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 32 Lenox Road # C8		Transaction ID: 2232319	
City State Zip Code Brooklyn NY 11226		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 844 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Polly M. Covell		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 7 Saint Andrews Way		Transaction ID: 2231899	
City Londonderry	State NH	Zip Code 03053	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Louise Cantrell-Kehoe		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 15971 Charter House Ln		Transaction ID: 2237472	
City Purcellville	State VA	Zip Code 20132	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer	Occupation Homemaker	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Marsha Pedersen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 5250 W. Avenue L6		Transaction ID: 2237524	
City Quartz Hill	State CA	Zip Code 93536	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 845 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marilyn M. Meardon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 24 Rhode Island Avenue		Transaction ID: 2231859	
City State Zip Code Providence RI 02906		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation RI Comm. for the Humanities Actress		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Mary Rux North		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 836 Welcome Way SE		Transaction ID: 2231810	
City State Zip Code Salem OR 97302		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mrs. Jeanne Moore		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 12 Somer Drive		Transaction ID: 2232316	
City State Zip Code Somerville NJ 08876		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Borough of Somerville, NJ Borough Councilwoman		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 846 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laura Yaeger		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 400 North Church Street Unit 712		Transaction ID: 2232916	
City State Zip Code Charlotte NC 28202		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Perry, Patrick, et al Attorney		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Carol E. Copeland		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 1726 Grant Street		Transaction ID: 2232947	
City State Zip Code Berkeley CA 94703		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mr. Gerhard F. Paskusz		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 850 Kuhlman Road		Transaction ID: 2233991	
City State Zip Code Houston TX 77024		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation University of Houston Professor		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 847 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Patricia A. Mangini		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 4122 Amoroso St.		Transaction ID: 2233332	
City State Zip Code San Diego CA 92111	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Self Occupation Clinical Psychologist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Mr. Glenn E Berkovitz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 11929 Windward Avenue		Transaction ID: 2234083	
City State Zip Code Los Angeles CA 90066	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Freelance - various Occupation Audio technician	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Mr. Carl E. Langenhop		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 2200 Greentree N. Apt. 1107		Transaction ID: 2237503	
City State Zip Code Clarksville IN 47129	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 848 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carolyn K. Gusmer

Mailing Address 122 Shadow Lake Drive

City State Zip Code
Waupaca WI 54981

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237507

Amount of Each Receipt this Period
250.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Eleanor Weinstock

Mailing Address 525 South Flagler Drive
Apt. 12c

City State Zip Code
West Palm Beach FL 33401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237450

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Elaine Tobin

Mailing Address 2337 Veteran Avenue

City State Zip Code
Los Angeles CA 90064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U of California Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231774

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 849 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Martha P. Poling

Mailing Address 1532 Sinclair Drive

City State Zip Code
McLean VA 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232302

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elizabeth K. MacKenzie

Mailing Address 134 W 93rd Street, Apt. 4B

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232277

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Linda L. Daube

Mailing Address 50 Scarborough Road

City State Zip Code
Manchester CT 06040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Community Renewal Team, Inc. Registered Dietician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2233622

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 850 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Karen O Hofmeister

Mailing Address 2121 Kirby Drive
No 97

City State Zip Code
Houston TX 77019

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation author

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231341

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Spofford

Mailing Address 1116 Pearl Street

City State Zip Code
Columbus IN 47201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234040

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Florence Boroson

Mailing Address 50 Village Green Drive

City State Zip Code
Port Jefferson Sta NY 11776

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231792

Amount of Each Receipt this Period
25.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 851 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Anne Vidaver Mailing Address 2416 Sewell Street City Lincoln State NE Zip Code 68502 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231875 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	7	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	4		2	0	0	7														
50.00																							
Name of Employer U of NE Occupation Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Emelie S. Born Mailing Address 985 Memorial Dr. #603 City Cambridge State MA Zip Code 02138 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2232313 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	6		2	0	0	7														
100.00																							
Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Jean J. Robinson Mailing Address 9840 S Pulaski Road # 321 City Oak Lawn State IL Zip Code 60453 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231814 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	4		2	0	0	7														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 852 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Virginia Rankin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 1222 NE 100th Street		Transaction ID: 2232324	
City State Zip Code Seattle WA 98125		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Bellevue Public School Teacher		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Gloria T. Hern		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 7447 Sylmar Avenue		Transaction ID: 2232346	
City State Zip Code Van Nuys CA 91405		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Kathleen M McCormick		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 19928 Wissler Ranch Road		Transaction ID: 2233390	
City State Zip Code Black Forest CO 80908		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation civil service analyst		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 853 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Alice Smith

Mailing Address 531 Oneonta Street

City State Zip Code
Shreveport LA 71106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232291

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Col. Lucile M. Roberts

Mailing Address 23 Cora Circle

City State Zip Code
Bella Vista AR 72714

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232910

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret P. Allen

Mailing Address 3 Kendall Drive

City State Zip Code
Kennett Square PA 19348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2007

Transaction ID: 2240783

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 854 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judy Dudley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 349 Arthur Ave		Transaction ID: 2232326
City State Zip Code Aptos CA 95003	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Santa Cruz County, CA Legal Clerk	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Renate Wasserman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 102 Tonset Road		Transaction ID: 2233361
City State Zip Code Orleans MA 02653	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Dolores S. Stickler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 2323 Pittston Ave		Transaction ID: 2232930
City State Zip Code Scranton PA 18505	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 855 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Mary Louise L Kimball		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 301 Linden PondsWay # 105		Transaction ID: 2231764	
City Hingham	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02043		Carol Shea-Porter Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms. Minnie J. Carson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 12440 Rivercrest Drive		Transaction ID: 2231800	
City Little Rock	State AR	Amount of Each Receipt this Period 250.00	
Zip Code 72212		Carol Shea-Porter Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation Homemaker	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. Virginia Hodgkinson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 1907 Windmill Lane		Transaction ID: 2231872	
City Alexandria	State VA	Amount of Each Receipt this Period 100.00	
Zip Code 22307		Carol Shea-Porter Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation Retired	Aggregate Year-to-Date ▼ 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 856 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Cheryl Wilfong		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 314 Partridge Road		Transaction ID: 2232423	
City State Zip Code E Dummerston VT 05346	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Sarah Hancock		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 31 Summit Rd		Transaction ID: 2231751	
City State Zip Code Belmont MA 02478	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Miriam R. Karger		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 7 Rivermead Road		Transaction ID: 2233365	
City State Zip Code Peterborough NH 03458	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 857 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Kaplan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 711 Adams Street		Transaction ID: 2231851	
City State Zip Code Hoboken NJ 07030	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Carol Realty	Occupation Manager	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Veronica M Combs		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 7	
Mailing Address 2232 Gary Drive		Transaction ID: 2231172	
City State Zip Code New Albany IN 47150	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer MedTrackAlert	Occupation Managing editor	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Karen Cox		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 15214 Manzanita Diggins		Transaction ID: 2231754	
City State Zip Code Nevada City CA 95959	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 858 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. B. Prem		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 112 Lundy Lane		Transaction ID: 2232977	
City State Zip Code Lopez Island WA 98261		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Jane Case Einbender		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 10 MacDougal Alley		Transaction ID: 2233375	
City State Zip Code New York NY 10011		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda E. Pelegrino		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 74936 Liveoak Street		Transaction ID: 2240785	
City State Zip Code Indian Wells CA 92210		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation United Way Non Profit Mgr		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 859 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jeanne Thune		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 767 St. John S. Way		Transaction ID: 2237493	
City State Zip Code Hendersonville NC 28791	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) B. Ms. Gail Spane		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 1101 G Street SE		Transaction ID: 2240809	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation TAX ADVISOR	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) C. Ms. Elaine G. Fishman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 24511 N. Elm Road		Transaction ID: 2233979	
City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 860 / 1028														
<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) M. E. Shank Mailing Address P.O. Box 450 City York Harbor State ME Zip Code 03911 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Transaction ID: 2232353 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Dr. Sandra Wallace Mailing Address 1330 El Vago Street City La Canada State CA Zip Code 91011 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Transaction ID: 2233333 Amount of Each Receipt this Period 100.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Jacquelin Lindstrom Mailing Address 2900A Montezuma Avenue City Alhambra State CA Zip Code 91803 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Transaction ID: 2232349 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 861 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia Reynolds		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 1180 Woods Cir lce NE		Transaction ID: 2232436	
City State Zip Code Atlanta GA 30324	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contrib-utions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Dianne Durrwachter		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 809 West 5th Street		Transaction ID: 2232447	
City State Zip Code Port Angeles WA 98363	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contrib-utions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Ann Chase Hendrie		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 2 Warrens Point Road		Transaction ID: 2231830	
City State Zip Code Little Compton RI 02837	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contrib-utions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 862 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Eva Herzfeld		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 8232 211th Street		Transaction ID: 2231833	
City State Zip Code Jamaica NY 11427	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Jacqueline R. McCarthy		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 9314 Sawyer Street		Transaction ID: 2237534	
City State Zip Code Los Angeles CA 90035	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Constance C. Moore		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 419 South Camac Street		Transaction ID: 2231769	
City State Zip Code Philadelphia PA 19147	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 863 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Virginia M. Kuhn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 168 Sterling Point		Transaction ID: 2233644	
City State Zip Code Winston Salem NC 27104	Amount of Each Receipt this Period 18.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) B. Ms. Deborah J. Nosowsky		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 278 Amber Drive		Transaction ID: 2233347	
City State Zip Code San Francisco CA 94131	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Government Affairs Director	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) C. Mrs. Barbara H. Malcolm		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 4775 S Harbor Dr Apt 101		Transaction ID: 2232960	
City State Zip Code Vero Beach FL 32967	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 864 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Elsie S. Sweeney		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 21775 Woodland Crest Drive		Transaction ID: 2233385	
City State Zip Code Woodland Hills CA 91364		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Donna Pepos		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 4206 Forest Beach Drive, NW		Transaction ID: 2232950	
City State Zip Code Gig Harbor WA 98335		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Cecelia Gale Sears		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 11 Marseilles Court		Transaction ID: 2233370	
City State Zip Code Savannah GA 31419		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 865 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Jean Crichton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 173 Summit Avenue		Transaction ID: 2232904	
City State Zip Code Summit NJ 07901	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Freelance Writer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Catherine Medich		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 14 Stonicker Drive		Transaction ID: 2240784	
City State Zip Code Lawrenceville NJ 08648	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation State of NJ Archivist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. William Swartchild		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 119 Erledon Road		Transaction ID: 2232341	
City State Zip Code Tenafly NJ 07670	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 866 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ruth Mead		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 203 Thorn Hollow Drive		Transaction ID: 2231808	
City State Zip Code Apex NC 27523		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation ERG Environmental Consulting		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Priscilla Meyer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 4424 Athens Avenue		Transaction ID: 2240795	
City State Zip Code Waco TX 76710		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Ruth Swanton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 41 Howard Avenue		Transaction ID: 2233355	
City State Zip Code New Haven CT 06519		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 867 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Charlene Blair		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 3626 Redbird		Transaction ID: 2233265	
City State Zip Code Waco TX 76705		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation City of Waco Technician		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Suzanne Winn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 1414 Main St		Transaction ID: 2231766	
City State Zip Code Lynnfield MA 01940		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Homemaker		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Susanne J Demuth		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 46 Hillcrest Avenue		Transaction ID: 2232936	
City State Zip Code Port Jefferson NY 11777		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 868 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Eugene A. Hildreth		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 2000 Cambridge Avenue Apt. 129		Transaction ID: 2232906
City State Zip Code Wyomissing PA 19610	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Sue Ann Anderson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 9340 N. Shore Trail N		Transaction ID: 2233641
City State Zip Code Forest Lake MN 55025	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Nurse Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Phyllis Freeland Broyles		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 2216		Transaction ID: 2232926
City State Zip Code McKinleyville CA 95519	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 869 / 1028
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joan Bacall

Mailing Address 15 Eagle Drive

City State Zip Code
Newmarket NH 03857

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240805

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Constance B. Bennett

Mailing Address 200 Ankeny Street

City State Zip Code
San Francisco CA 94134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237455

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret Cardoza

Mailing Address 3656 Pine St

City State Zip Code
Castro Valley CA 94546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232410

Amount of Each Receipt this Period
25.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 870 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Jourdan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 2140 Santa Cruz Ave., # E202		Transaction ID: 2234069
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Evangeline Gonzales		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 8905 Allbill Way		Transaction ID: 2232402
City State Zip Code San Diego CA 92119	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Joanna London		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 3940 Langley Court NW Apt. E635		Transaction ID: 2232344
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lawyer Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 871 / 1028
(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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Richard Mironov

Mailing Address 111 Aragon Blvd

City San Mateo	State CA	Zip Code 94402
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Self	Occupation Consultant
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231811

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contrib-
utions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sue Krenek

Mailing Address 6 Main Dock

City Sausalito	State CA	Zip Code 94965
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C

Name of Employer PC World Communications	Occupation lawyer
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 7

Transaction ID: 2233192

Amount of Each Receipt this Period
25.00

Carol Shea-Porter Contrib-
utions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lois T. Phelps

Mailing Address 47 Garrison Avenue

City Battle Creek	State MI	Zip Code 49017
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C

Name of Employer USAF	Occupation Logistician
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232289

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contrib-
utions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 872 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Shirley J. Humphrey		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 6000 Lake Road, W #112		Transaction ID: 2232307	
City State Zip Code Ashtabula OH 44004	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) B. Ms. Nobuko Ohashi		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 10654 Montrose Avenue Apt. 103		Transaction ID: 2232275	
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Librarian	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

Full Name (Last, First, Middle Initial) C. Ms. Joanna B. Taylor		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 3701 27th Street N.		Transaction ID: 2240807	
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED	[MEMO ITEM] MEMO	
Aggregate Year-to-Date ▼ 0.00			

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 873 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Thomas Kerenyi

Mailing Address 1125 Park Avenue

City State Zip Code
New York NY 10128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231846

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Cope

Mailing Address 370 Riverside Drive, Apt. 15C

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232355

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ethel L. Gould

Mailing Address 757 Flume Court

City State Zip Code
Milpitas CA 95035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232980

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 874 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary H. Black		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 9484 SW 92nd Place Road		Transaction ID: 2237435	
City State Zip Code Ocala FL 34481	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Elise Wendel Murray		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 75 Cherry Brook Drive		Transaction ID: 2231824	
City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Judith Stetson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 261 Quissett Avenue		Transaction ID: 2237498	
City State Zip Code Falmouth MA 02543	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 875 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Matre		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 24700 Voorhees Drive		Transaction ID: 2231778	
City State Zip Code Los Altos Hills CA 94022		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer unemployed Occupation R.N.		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Dr. Joyce C Hagen		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 2913 Hollyridge Drive		Transaction ID: 2231821	
City State Zip Code Los Angeles CA 90068		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Cal.State.Univ.Northridge Occupation professor emeritus		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Suzanne Brown		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 19650 Timberline Drive		Transaction ID: 2233337	
City State Zip Code Brookfield WI 53045		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 876 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Ann R. Stokes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address P.O. Box 84		Transaction ID: 2237481	
City West Chesterfield	State NH	Zip Code 03466	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Self	Occupation Painter		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial) Ms. Barbara J. Gingher		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 908 Holly Road		Transaction ID: 2237467	
City Belmont	State CA	Zip Code 94002	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial) Mrs. Eleanor Weiss-Zoub		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 6509 N. Kilbourn Avenue		Transaction ID: 2231816	
City Lincolnwood	State IL	Zip Code 60712	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 877 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Sally H. Hollaman

Mailing Address 7 Riverwoods Drive Unit P219

City Exeter State NH Zip Code 03833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2007

Transaction ID: 2231785

Amount of Each Receipt this Period
250.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Molly Oberbillig

Mailing Address 1907 Parkwood Drive SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 16 / 2007

Transaction ID: 2233342

Amount of Each Receipt this Period
25.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jan E. Schochet

Mailing Address 6511 Falllenbridge Road

City Chapel Hill State NC Zip Code 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2007

Transaction ID: 2231867

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 878 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Earl Withycombe		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address PO Box 161821		Transaction ID: 2231885	
City Sacramento	State CA	Zip Code 95816	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Sierra Research	Occupation Environmental Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Lindblom		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 1915 Diamond Court		Transaction ID: 2233348	
City Santa Rosa	State CA	Zip Code 95404	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Evelyn B Haynes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 2303 Owens Avenue # 101		Transaction ID: 2232943	
City Fort Collins	State CO	Zip Code 80528	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 879 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marion McConnell Mailing Address PO Box 832 City Cotuit State MA Zip Code 02635 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Transaction ID: 2233374 Amount of Each Receipt this Period 30.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Phyllis J. Cohen Mailing Address 6619 Mercer Street City Houston State TX Zip Code 77005 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7 Transaction ID: 2233894 Amount of Each Receipt this Period 50.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer City of West University Occupation Council Member Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mrs. Clay Kenan Kirk Mailing Address 320 East 72nd St., Apt. 5C City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Transaction ID: 2232919 Amount of Each Receipt this Period 1000.00 Carol Shea-Porter Contributions [MEMO ITEM] MEMO
Name of Employer Self Occupation Investment Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 880 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ethel Sutton

Mailing Address 61 Brown Road

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232954

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Sandra Carr

Mailing Address PO Box 223

City State Zip Code
Silver Lake NH 03875

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237482

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Pauline Andrews

Mailing Address P.O. Box 5487

City State Zip Code
Santa Monica CA 90409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Peoples Group, Inc. Assoc. Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240812

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 881 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sandra I. Blair

Mailing Address 1815 Chestnut Street

City State Zip Code
Berkeley CA 94702

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237436

Amount of Each Receipt this Period
250.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Paula Roloff

Mailing Address 19 Acacia Lane

City State Zip Code
Redwood City CA 94062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232336

Amount of Each Receipt this Period
50.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Barbara J Corwin

Mailing Address 1230 Winding Ridge Terrace

City State Zip Code
Colorado Springs CO 80919

FEC ID number of contributing federal political committee. **C**

Name of Employer Sun Microsystems, Inc Occupation SW Engineering Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237488

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 882 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Shirley Klass		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 226 S. Reese Street		Transaction ID: 2233638	
City State Zip Code Memphis TN 38111		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Patricia Ann Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 234 Crescent Drive		Transaction ID: 2237462	
City State Zip Code Orinda CA 94563		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Ann Marie Hendricks		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 29 Pond Street		Transaction ID: 2231791	
City State Zip Code Hopkinton MA 01748		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 883 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marta VanLoan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 930 W. Arlington Street		Transaction ID: 2234010	
City State Zip Code Martinez CA 94553	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation US Dept. Agriculture Scientist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Joyce J. Freitag		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 2391 SW 13th way		Transaction ID: 2231768	
City State Zip Code Boynton Beach FL 33426	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Cornelia W. Lanou		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 90 Keene Street		Transaction ID: 2231805	
City State Zip Code Providence RI 02906	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 884 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Patricia D. Withers		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 914 Main Unit 906		Transaction ID: 2231826
City State Zip Code Houston TX 77002	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions	
Name of Employer First Unit. Univ. Church Occupation Dir. Rel. Ed.	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Christine A. Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address P.O. Box 3888		Transaction ID: 2240797
City State Zip Code La Mesa CA 91944	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions	
Name of Employer Central Dupage Hospital Occupation Nurse	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mrs. Jane Ross		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 1789 Woodfield Road		Transaction ID: 2231870
City State Zip Code Mansfield NJ 08836	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Carol Shea-Porter Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 885 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Shirley Peters

Mailing Address 3055 Autumn Court

City State Zip Code
Winter Park FL 32792

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237476

Amount of Each Receipt this Period
25.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Claire Perey

Mailing Address 4678 Gravelly Hills

City State Zip Code
Louisville TN 37777

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237432

Amount of Each Receipt this Period
100.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Camille Kurtz

Mailing Address 2401 Calvert Street NW
Apt. 902

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2238297

Amount of Each Receipt this Period
25.00

Carol Shea-Porter Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 886 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Janet T. Spence Mailing Address P.O. Box 465 City State Zip Code Dennis MA 02638 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2233994 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	0		2	0	0	7														
100.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Margaret T. Gelin Mailing Address 105 Trowbridge Street, #4 City State Zip Code Cambridge MA 02138 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2233350 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	7	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	6		2	0	0	7														
250.00																							
Name of Employer Occupation Framingham, MA Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Mr. David Cobey Mailing Address P.O. Box 31 City State Zip Code Cushing ME 04563 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2232280 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Carol Shea-Porter Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	6		2	0	0	7														
100.00																							
Name of Employer Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 887 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. David P Rice		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 54 Whiteoaks Circle		Transaction ID: 2233633	
City Bluffton	State SC	Zip Code 29910	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Carol Shea-Porter Contributions	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	[MEMO ITEM] MEMO	
Aggregate Year-to-Date 0.00			

Full Name (Last, First, Middle Initial) B. Ms. Mary E. LeTellier		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address P.O. Box 1488		Transaction ID: 2231827	
City Weaverlle	State CA	Zip Code 96093	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Coldwell-Banker	Occupation Real Estate	[MEMO ITEM] MEMO	
Aggregate Year-to-Date 0.00			

Full Name (Last, First, Middle Initial) C. Ms. Linda E. Pelegrino		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 74936 Liveoak Street		Transaction ID: 2240786	
City Indian Wells	State CA	Zip Code 92210	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer United Way	Occupation Non Profit Mgr	[MEMO ITEM] MEMO	
Aggregate Year-to-Date 0.00			

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 888 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marilyn M. Meardon

Mailing Address 24 Rhode Island Avenue

City Providence State RI Zip Code 02906

FEC ID number of contributing federal political committee. **C**

Name of Employer RI Comm. for the Humanities Occupation Actress

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231858

Amount of Each Receipt this Period
35.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Jeanne Thune

Mailing Address 767 St. John S. Way

City Hendersonville State NC Zip Code 28791

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237494

Amount of Each Receipt this Period
25.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sue Ann Anderson

Mailing Address 9340 N. Shore Trail N

City Forest Lake State MN Zip Code 55025

FEC ID number of contributing federal political committee. **C**

Name of Employer Fairview Lakes Home Caring Occupation Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2233643

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 889 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. Glenn E Berkovitz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 11929 Windward Avenue		Transaction ID: 2234084	
City State Zip Code Los Angeles CA 90066		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation Freelance - various Audio technician		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Andrea Harris Scheidt		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 40 East 80 Street		Transaction ID: 2231759	
City State Zip Code New York NY 10021		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation Kenyon & Kenyon Attorney		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Anne Vidaver		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 2416 Sewell Street		Transaction ID: 2231876	
City State Zip Code Lincoln NE 68502		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation U of NE Professor		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 890 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia M. Slatt		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 25 Central Park W Apt. 71		Transaction ID: 2233653
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Self Occupation Psychotherapist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Dr. Elizabeth F Shipley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 805 Hagys Ford Road		Transaction ID: 2231332
City State Zip Code Narberth PA 19072	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Carol Matre		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 24700 Voorhees Drive		Transaction ID: 2231777
City State Zip Code Los Altos Hills CA 94022	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer unemployed Occupation R.N.	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 891 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Gerhard F. Paskusz

Mailing Address 850 Kuhlman Road

City State Zip Code
Houston TX 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of Houston Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 2233993

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Dennis Schwank

Mailing Address 1034 Riviera Dr

City State Zip Code
Elgin IL 60124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Stewart Assoc. Inc. Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2007

Transaction ID: 2233636

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Shirley D. Kirkland

Mailing Address 17 E. 84th Street

City State Zip Code
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 2234006

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 892 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Jessop Brewster		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 242 Rivermead Rd		Transaction ID: 2240799
City State Zip Code Peterborough NH 03458	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Dianne Durrwachter		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 809 West 5th Street		Transaction ID: 2232449
City State Zip Code Port Angeles WA 98363	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Gail A. Peery		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 7755 Dunhill Drive		Transaction ID: 2237510
City State Zip Code Sylvania OH 43560	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 893 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Rux North		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 836 Welcome Way SE		Transaction ID: 2231809	
City State Zip Code Salem OR 97302	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Camille Kurtz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2401 Calvert Street NW Apt. 902		Transaction ID: 2238298	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Louise P. Saltzman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 760 Bronson Lane		Transaction ID: 2232394	
City State Zip Code Highland Park IL 60035	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Self Clinical Social Worker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 894 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ethel L. Gould

Mailing Address 757 Flume Court

City Milpitas State CA Zip Code 95035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232981

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elise Wendel Murray

Mailing Address 75 Cherry Brook Drive

City Princeton State NJ Zip Code 08540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231823

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Lawrence Heaney

Mailing Address 1611 Cleveland Street

City Evanston State IL Zip Code 60202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232285

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 895 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Gloria T. Hern

Mailing Address 7447 Sylmar Avenue

City State Zip Code
Van Nuys CA 91405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232347

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Patricia Stegman

Mailing Address 245 Dean Street

City State Zip Code
Brooklyn NY 11217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232284

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Carol E. Copeland

Mailing Address 1726 Grant Street

City State Zip Code
Berkeley CA 94703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232946

Amount of Each Receipt this Period
25.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 896 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Patricia Ann Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 234 Crescent Drive		Transaction ID: 2237460	
City Orinda	State CA	Zip Code 94563	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mr. S. Michael D. Lunn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 1601 Elm Street # 2000		Transaction ID: 2233674	
City Dallas	State TX	Zip Code 75313	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Self	Occupation consultant	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. William Swartchild		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 119 Erledon Road		Transaction ID: 2232340	
City Tenafly	State NJ	Zip Code 07670	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 897 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. George W. Ranney		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 91 Prospect Street		Transaction ID: 2232406
City State Zip Code Port Chester NY 10573	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions [MEMO ITEM] MEMO
Name of Employer NYS	Occupation Tax Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Phyllis J. Cohen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 6619 Mercer Street		Transaction ID: 2233895
City State Zip Code Houston TX 77005	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions [MEMO ITEM] MEMO
Name of Employer City of West University	Occupation Council Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Evelyn B Haynes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 2303 Owens Avenue # 101		Transaction ID: 2232942
City State Zip Code Fort Collins CO 80528	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions [MEMO ITEM] MEMO
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 898 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Eleanor Weiss-Zoub		Date of Receipt M M / D D / Y Y Y Y 04 / 04 / 2007	
Mailing Address 6509 N. Kilbourn Avenue		Transaction ID: 2231817	
City State Zip Code Lincolnwood IL 60712	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Mary Ohlson		Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2007	
Mailing Address 617 Woodrow Street NW		Transaction ID: 2233358	
City State Zip Code North Canton OH 44720	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Marta VanLoan		Date of Receipt M M / D D / Y Y Y Y 04 / 20 / 2007	
Mailing Address 930 W. Arlington Street		Transaction ID: 2234012	
City State Zip Code Martinez CA 94553	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation US Dept. Agriculture Scientist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 899 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jean Crichton

Mailing Address 173 Summit Avenue

City State Zip Code
Summit NJ 07901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Freelance Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232905

Amount of Each Receipt this Period
75.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Michael A Simpson

Mailing Address 10 Somerset Place

City State Zip Code
Wilmington MA 01887

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mellon Financial Corp Accounting Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232311

Amount of Each Receipt this Period
500.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Barbara J. Gingher

Mailing Address 908 Holly Road

City State Zip Code
Belmont CA 94002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237468

Amount of Each Receipt this Period
20.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 900 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jane Case Einbender

Mailing Address 10 MacDougal Alley

City State Zip Code
New York NY 10011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2007

Transaction ID: 2233376

Amount of Each Receipt this Period
15.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Eva Herzfeld

Mailing Address 8232 211th Street

City State Zip Code
Jamaica NY 11427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231832

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Madeline Caton

Mailing Address 5905D Clark Road, Apt. 174

City State Zip Code
Paradise CA 95969

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231854

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 901 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Krause		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 1509 N Garfield Street		Transaction ID: 2232303	
City State Zip Code Arlington VA 22201	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Barnes & Noble Bookseller	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Jeannie Jones		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 11 Overlook Drive		Transaction ID: 2233631	
City State Zip Code Amherst MA 01002	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Mount Holyoke College Librarian	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Bennett		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 263 Dos Brazos Street		Transaction ID: 2234112	
City State Zip Code Los Alamos NM 87544	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 902 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Patricia Reynolds

Mailing Address 1180 Woods Circlce NE

City Atlanta State GA Zip Code 30324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232438

Amount of Each Receipt this Period
10.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marjorie E James

Mailing Address 14416 Tanglewood Dr.

City Farmers Branch State TX Zip Code 75234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231783

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Elsie S. Sweeney

Mailing Address 21775 Woodland Crest Drive

City Woodland Hls State CA Zip Code 91364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233386

Amount of Each Receipt this Period
25.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 903 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Betty Deshler

Mailing Address 1190 W. Camino Sagasta

City State Zip Code
Green Valley AZ 85614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232328

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marsha Pedersen

Mailing Address 5250 W. Avenue L6

City State Zip Code
Quartz Hill CA 93536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237526

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Eleanor Weinstock

Mailing Address 525 South Flagler Drive
Apt. 12c

City State Zip Code
West Palm Beach FL 33401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237451

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 904 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Julie S. Vargas

Mailing Address 11 Old Dee Rd

City State Zip Code
Cambridge MA 02138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WV U Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233366

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marilyn C. Dahl

Mailing Address 515 Station Road

City State Zip Code
Amherst MA 01002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2233619

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Katherine A. Kent

Mailing Address 179 Sea Hammock Way

City State Zip Code
Ponte Vedra FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231893

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 905 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Virginia M. Kuhn

Mailing Address 168 Sterling Point

City State Zip Code
Winston Salem NC 27104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2233646

Amount of Each Receipt this Period
18.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Hal C. Reed

Mailing Address 144 Orchard Hill Drive

City State Zip Code
South Windsor CT 06074

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of Connecticut Foundation Development Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 7

Transaction ID: 2232434

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jean J. Robinson

Mailing Address 9840 S Pulaski Road # 321

City State Zip Code
Oak Lawn IL 60453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231815

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 906 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Karen O Hofmeister

Mailing Address 2121 Kirby Drive
No 97

City State Zip Code
Houston TX 77019

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation author

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 02 / 2007

Transaction ID: 2231342

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Nancy Fogel

Mailing Address 4881 Cobbler Court

City State Zip Code
Pleasanton CA 94566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231889

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. June M. Terrell

Mailing Address 1178 Spencer Hill D

City State Zip Code
Saint Peters MO 63376

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232941

Amount of Each Receipt this Period
25.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 907 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Letha M. Sweet		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 1200 Mira Mar Avenue # 823		Transaction ID: 2237486
City State Zip Code Medford OR 97504	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Donna J. Nellist		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 4701 133rd Avenue SE		Transaction ID: 2231850
City State Zip Code Bellevue WA 98006	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Edith Hersher		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 212 Beers Road		Transaction ID: 2237484
City State Zip Code Easton CT 06612	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 908 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Yvonne Myles

Mailing Address 2111 Welch St Apt B312

City State Zip Code
Houston TX 77019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONOCO Administrative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2007

Transaction ID: 2233373

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Luann Wilkins Abrahams

Mailing Address 45 Walnut Street

City State Zip Code
Somerville MA 02143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Harvard University Art Museums Museum Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231789

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Betty Sancier

Mailing Address 2715 East Park Place

City State Zip Code
Milwaukee WI 53211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231880

Amount of Each Receipt this Period
25.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 909 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patti Kile		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address E3412 Bunker Road		Transaction ID: 2240792	
City Waupaca	State WI	Zip Code 54981	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Thedacare Waupaca	Occupation Healthcare	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Priscilla Meyer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 4424 Athens Avenue		Transaction ID: 2240793	
City Waco	State TX	Zip Code 76710	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Miss Marjorie D. Seward		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 435 Martin Terrace		Transaction ID: 2237429	
City State College	State PA	Zip Code 16803	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 910 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. June Weisberger Blanchard		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 2021 Van Hise Avenue		Transaction ID: 2233931	
City State Zip Code Madison WI 53726	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Brenna Flaughter		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 1116 Clover Court		Transaction ID: 2233368	
City State Zip Code Batavia IL 60510	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation VRA Scientist	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Judy Lane		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 114 Dennis Whitney Road		Transaction ID: 2233651	
City State Zip Code Oakham MA 01068	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 911 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Jourdan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 2140 Santa Cruz Ave., # E202		Transaction ID: 2234071
City State Zip Code Menlo Park CA 94025	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Nancy Allison		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 137 E. 19th Street # 1		Transaction ID: 2232962
City State Zip Code New York NY 10003	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda Carlisle		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 5411 Rambling Road		Transaction ID: 2232974
City State Zip Code Greensboro NC 27409	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 912 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Eugene A. Hildreth

Mailing Address 2000 Cambridge Avenue
Apt. 129

City State Zip Code
Wyomissing PA 19610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232907

Amount of Each Receipt this Period
250.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Constance C. Moore

Mailing Address 419 South Camac Street

City State Zip Code
Philadelphia PA 19147

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231770

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth K. MacKenzie

Mailing Address 134 W 93rd Street, Apt. 4B

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232276

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 913 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Renate Wasserman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 102 Tonset Road		Transaction ID: 2233362	
City State Zip Code Orleans MA 02653	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Ruth Swanton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 41 Howard Avenue		Transaction ID: 2233356	
City State Zip Code New Haven CT 06519	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Constance B. Bennett		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 200 Ankeny Street		Transaction ID: 2237456	
City State Zip Code San Francisco CA 94134	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 914 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. David Cobey Mailing Address P.O. Box 31 City Cushing State ME Zip Code 04563 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Transaction ID: 2232279 Amount of Each Receipt this Period 100.00 Gabby Giffords Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Emelie S. Born Mailing Address 985 Memorial Dr. #603 City Cambridge State MA Zip Code 02138 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Transaction ID: 2232314 Amount of Each Receipt this Period 100.00 Gabby Giffords Contributions [MEMO ITEM] MEMO
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consultant Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Mr. Carl E. Langenhop Mailing Address 2200 Greentree N. Apt. 1107 City Clarksville State IN Zip Code 47129 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Transaction ID: 2237501 Amount of Each Receipt this Period 35.00 Gabby Giffords Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 915 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Karen Wilkins

Mailing Address 2639 E Lake Shore Dr

City State Zip Code
Grayling MI 49738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231887

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Sandra Wallace

Mailing Address 1330 El Vago Street

City State Zip Code
La Canada CA 91011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2007

Transaction ID: 2233334

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Laura Yaeger

Mailing Address 400 North Church Street
Unit 712

City State Zip Code
Charlotte NC 28202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Perry, Patrick, et al Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232915

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 916 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sue Krenek		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7
Mailing Address 6 Main Dock		Transaction ID: 2233193
City State Zip Code Sausalito CA 94965	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation PC World Communications lawyer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Phyllis Freeland Broyles		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 2216		Transaction ID: 2232927
City State Zip Code McKinleyville CA 95519	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Joanna London		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 3940 Langley Court NW Apt. E635		Transaction ID: 2232343
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions	
Name of Employer Occupation US INS Lawyer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 917 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Veronica M Combs

Mailing Address 2232 Gary Drive

City State Zip Code
New Albany IN 47150

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MedTrackAlert Managing editor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 7

Transaction ID: 2231173

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Janet T. Spence

Mailing Address P.O. Box 465

City State Zip Code
Dennis MA 02638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2233996

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Janet Hofmann

Mailing Address 3889 Harvest Drive

City State Zip Code
Redwood City CA 94061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231841

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 918 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Sheila Oconnor		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 2 Englewood Dr Apt		Transaction ID: 2232329	
City Harwich	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 02645		Gabby Giffords Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation REQUESTED	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

B. Full Name (Last, First, Middle Initial) Ms. Joanna B. Taylor		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 3701 27th Street N.		Transaction ID: 2240808	
City Arlington	State VA	Amount of Each Receipt this Period 50.00	
Zip Code 22207		Gabby Giffords Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation REQUESTED	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

C. Full Name (Last, First, Middle Initial) Ms. Mary Cope		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 370 Riverside Drive, Apt. 15C		Transaction ID: 2232356	
City New York	State NY	Amount of Each Receipt this Period 50.00	
Zip Code 10025		Gabby Giffords Contributions	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] MEMO	
Name of Employer	Occupation Retired	Aggregate Year-to-Date 0.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 919 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen M McCormick		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 19928 Wissler Ranch Road		Transaction ID: 2233391	
City State Zip Code Black Forest CO 80908	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation civil service analyst	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Margaret Cardoza		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 3656 Pine St		Transaction ID: 2232412	
City State Zip Code Castro Valley CA 94546	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Gayna Reen Radtke		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 1273 Hearst Avenue		Transaction ID: 2232966	
City State Zip Code Berkeley CA 94702	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation self Enrolled Agent	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 920 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Catherine P. Smith

Mailing Address 3565 Rosalinda Dr

City State Zip Code
Reno NV 89503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232333

Amount of Each Receipt this Period
35.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ruth K. Freymann

Mailing Address 355 Blackstone Blvd

City State Zip Code
Providence RI 02906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232414

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Suzanne Brown

Mailing Address 19650 Timberline Drive

City State Zip Code
Brookfield WI 53045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233338

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 921 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Elizabeth T. Boris		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 3516 Duff Drive		Transaction ID: 2232384	
City Falls Church	State VA	Zip Code 22041	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Urban Institute	Occupation Research		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Ethel A. Plagenz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 1957 W. Island Circle		Transaction ID: 2231847	
City Safford	State AZ	Zip Code 85546	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Beth Triplett		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 106 Bellechasse Drive		Transaction ID: 2232421	
City Chesterfield	State MO	Zip Code 63017	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Maryville Univ.	Occupation High School Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 922 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Susan Miller

Mailing Address 12718 Sawdust Drive

City State Zip Code
Glen Allen VA 23059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232934

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Kathryn Kuehl

Mailing Address 3400 Sullivan Court Apt.175

City State Zip Code
Modesto CA 95356

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
California Department of Corrections Personnel Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232948

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Joyce C Hagen

Mailing Address 2913 Hollyridge Drive

City State Zip Code
Los Angeles CA 90068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cal.State.Univ.Northridge professor emeritus

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231822

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 923 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Mary T. Zeis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 335 Whispering Pines		Transaction ID: 2232338	
City Loveland	State OH	Zip Code 45140	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Procter & Gamble	Occupation Chemical Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

B. Full Name (Last, First, Middle Initial) Ms. Arlene Grindstad		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 3242 W. Wethersfield Road		Transaction ID: 2237491	
City Phoenix	State AZ	Zip Code 85029	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

C. Full Name (Last, First, Middle Initial) Ms. Virginia Hodgkinson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 1907 Windmill Lane		Transaction ID: 2231873	
City Alexandria	State VA	Zip Code 22307	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 924 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mrs. Clay Kenan Kirk Mailing Address 320 East 72nd St., Apt. 5C City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2232918 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Gabby Giffords Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	1		2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	1		2	0	0	7														
1000.00																							
Name of Employer Self Occupation Investment Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) B. Prem Mailing Address 112 Lundy Lane City Lopez Island State WA Zip Code 98261 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2232976 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Gabby Giffords Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	1		2	0	0	7	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	1		2	0	0	7														
40.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Virginia Rankin Mailing Address 1222 NE 100th Street City Seattle State WA Zip Code 98125 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2232323 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Gabby Giffords Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	6		2	0	0	7														
100.00																							
Name of Employer Bellevue Public School Occupation Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 925 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Molly Oberbillig		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 1907 Parkwood Drive SE		Transaction ID: 2233340	
City Olympia State WA Zip Code 98501	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Cheryl Wilfong		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 314 Partridge Road		Transaction ID: 2232425	
City E Dummerston State VT Zip Code 05346	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mrs. Barbara J Corwin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1230 Winding Ridge Terrace		Transaction ID: 2237489	
City Colorado Springs State CO Zip Code 80919	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Sun Microsystems, Inc	Occupation SW Engineering Mgr	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 926 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Shirley Peters

Mailing Address 3055 Autumn Court

City State Zip Code
Winter Park FL 32792

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237477

Amount of Each Receipt this Period
25.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elaine Tobin

Mailing Address 2337 Veteran Avenue

City State Zip Code
Los Angeles CA 90064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U of California Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231773

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Jo Anna Dale

Mailing Address 704 N. Ponca Drive

City State Zip Code
Independence MO 64056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237533

Amount of Each Receipt this Period
50.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 927 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Betty Lattie Mailing Address PO Box 2050 City <u>Waldport</u> State <u>OR</u> Zip Code <u>97394</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2237516 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Gabby Giffords Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	3		2	0	0	7														
100.00																							
Name of Employer: Wells Fargo Occupation: Bank Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Mr. Earl Withycombe Mailing Address PO Box 161821 City <u>Sacramento</u> State <u>CA</u> Zip Code <u>95816</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231884 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Gabby Giffords Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	7	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	4		2	0	0	7														
50.00																							
Name of Employer: Sierra Research Occupation: Environmental Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Mignon S Adams Mailing Address 1922 Pemberton Street City <u>Philadelphia</u> State <u>PA</u> Zip Code <u>19146</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231793 Amount of Each Receipt this Period <table border="1"> <tr> <td>35.00</td> </tr> </table> Gabby Giffords Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	7	35.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	4		2	0	0	7														
35.00																							
Name of Employer: Univ. of Sciences in Philadelphia Occupation: Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 928 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sally Maier		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 2519 8th Street		Transaction ID: 2232970	
City State Zip Code Livermore CA 94550	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Las Positas College Instructor	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth Haan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address P.O. Box 999		Transaction ID: 2240804	
City State Zip Code Waldron WA 98297	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Lily Eskelsen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 1819 19th Street NW Apt. 2		Transaction ID: 2231837	
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Gabby Giffords Contributions		
Name of Employer Occupation National Education Assoc Educator	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 929 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Pauline Andrews

Mailing Address P.O. Box 5487

City State Zip Code
Santa Monica CA 90409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Peoples Group, Inc. Assoc. Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240813

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. William T. Terrell

Mailing Address 7447 Oxford Court

City State Zip Code
Wichita KS 67226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self economist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231781

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret A. Hefner

Mailing Address 715 N Price Road

City State Zip Code
Olivette MO 63132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
St. Louis University School of Medicin Genetic Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237537

Amount of Each Receipt this Period
100.00

Gabby Giffords Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 930 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Valerie Rowe		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 300 Central Park West 29G		Transaction ID: 2237474	
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation Fordham University Student	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Catherine Halcomb		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address P.O. Box 409		Transaction ID: 2232964	
City State Zip Code Beulah CO 81023	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Dolores S. Stickler		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 2323 Pittston Ave		Transaction ID: 2232931	
City State Zip Code Scranton PA 18505	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Gabby Giffords Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 931 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Caroline Peters Mailing Address 5553 Ashby Ct City Waterford State MI Zip Code 48327 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2237536 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Gabby Giffords Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	7	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	3		2	0	0	7														
50.00																							
Name of Employer: Pontiac Osteopathic Hospital Occupation: RN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

B. Full Name (Last, First, Middle Initial) Ms. Julie C. Monson Mailing Address P.O. Box 1029 City Point Reyes Sta. State CA Zip Code 94956 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231882 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Hillary Clinton Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	4		2	0	0	7														
100.00																							
Name of Employer: Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

C. Full Name (Last, First, Middle Initial) Ms. Stephanie K Eller Mailing Address 2706 N. Pollard St. City Arlington State VA Zip Code 22207 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 2231461 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Hillary Clinton Contributions [MEMO ITEM] MEMO	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	3		2	0	0	7	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	3		2	0	0	7														
25.00																							
Name of Employer: H. B. Productions Occupation: Researcher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>		0.00																					
0.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 932 / 1028
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine A. Kent		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 179 Sea Hammock Way		Transaction ID: 2231891
City State Zip Code Ponte Vedra FL 32082	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. G. A. Willoughby		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 1211 Creek Forest Lane		Transaction ID: 2231869
City State Zip Code Austell GA 30106	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer INPO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Communications Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Karen Wilkins		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 2639 E Lake Shore Dr		Transaction ID: 2231886
City State Zip Code Grayling MI 49738	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 933 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Leslie S. Christensen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 9728 Swift Creek Court		Transaction ID: 2232294	
City State Zip Code Fairfax Station VA 22039	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation Allfirst Trust Company Bank Officer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Nola W. Wallace		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 947 Stuhr Drive		Transaction ID: 2231755	
City State Zip Code San Gabriel CA 91775	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Sue Ann Anderson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 9340 N. Shore Trail N		Transaction ID: 2233640	
City State Zip Code Forest Lake MN 55025	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation Fairview Lakes Home Caring Nurse	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 934 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marta VanLoan

Mailing Address 930 W. Arlington Street

City State Zip Code
Martinez CA 94553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US Dept. Agriculture Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234009

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Ruth Dickler

Mailing Address 120 East 81st Street, Apt. 12C

City State Zip Code
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237500

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Judith Stetson

Mailing Address 261 Quissett Avenue

City State Zip Code
Falmouth MA 02543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237497

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 935 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Patricia D. Withers

Mailing Address 914 Main Unit 906

City State Zip Code
Houston TX 77002

FEC ID number of contributing federal political committee. **C**

Name of Employer First Unit. Univ. Church Occupation Dir. Rel. Ed.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231825

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Eula Lee West

Mailing Address 26 Calle Cal

City State Zip Code
Santa Fe NM 87508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240780

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Jeanne Moore

Mailing Address 12 Somer Drive

City State Zip Code
Somerville NJ 08876

FEC ID number of contributing federal political committee. **C**

Name of Employer Borough of Somerville, NJ Occupation Borough Councilwoman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232315

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 936 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sally Maier

Mailing Address 2519 8th Street

City State Zip Code
Livermore CA 94550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Las Positas College Instructor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232969

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Barbara J. Gingher

Mailing Address 908 Holly Road

City State Zip Code
Belmont CA 94002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237466

Amount of Each Receipt this Period
20.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Carol Matre

Mailing Address 24700 Voorhees Drive

City State Zip Code
Los Altos Hills CA 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
unemployed R.N.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231779

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 937 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Sharon Lewis

Mailing Address 8842 San Badger Way

City Elk Grove State CA Zip Code 95624

FEC ID number of contributing federal political committee. **C**

Name of Employer Lodi USD Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233381

Amount of Each Receipt this Period
 100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elaine G. Fishman

Mailing Address 24511 N. Elm Road

City Lake Forest State IL Zip Code 60045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 0 / 2 0 0 7

Transaction ID: 2233978

Amount of Each Receipt this Period
 100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. David W Lange

Mailing Address 12 Pinecrest Court

City Greenbelt State MD Zip Code 20770

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 0 7

Transaction ID: 2239502

Amount of Each Receipt this Period
 500.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 938 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mr. Michael A Simpson

Mailing Address 10 Somerset Place

City State Zip Code
Wilmington MA 01887

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mellon Financial Corp Accounting Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232309

Amount of Each Receipt this Period
500.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Dianne Durrwachter

Mailing Address 809 West 5th Street

City State Zip Code
Port Angeles WA 98363

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232448

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Jody Carlson

Mailing Address 17 Appleby Road

City State Zip Code
Wellesley MA 02482

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Research Intenationanl Market Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231861

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 939 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ann Cutler

Mailing Address 8 Fetlock Lane

City State Zip Code
Blue Bell PA 19422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231797

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Gail A. Peery

Mailing Address 7755 Dunhill Drive

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237509

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Camille Kurtz

Mailing Address 2401 Calvert Street NW
Apt. 902

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 2238299

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 940 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jeanne Thune

Mailing Address 767 St. John S. Way

City Hendersonville State NC Zip Code 28791

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237495

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Elaine Kant

Mailing Address 7600 Valley Dale Drive

City Austin State TX Zip Code 78731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Computer Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232380

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Lisa Perry Hellerstein

Mailing Address 86 Stuyvesant Avenue

City Larchmont State NY Zip Code 10538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Administration

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232286

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 941 / 1028		
	<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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jeannette N. Wheeler

Mailing Address 7500 N. Calle Sin Envidia
Apt. 2207

City Tucson State AZ Zip Code 85718

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231849

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Barbara Ryder

Mailing Address 166 Grove Avenue

City Metuchen State NJ Zip Code 08840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rutgers University Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232357

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Marilyn M. Meardon

Mailing Address 24 Rhode Island Avenue

City Providence State RI Zip Code 02906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RI Comm. for the Humanities Actress

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231855

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 942 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joyce J. Freitag

Mailing Address 2391 SW 13th way

City State Zip Code
Boynnton Beach FL 33426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231767

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Christine E Henry

Mailing Address 729 Mill St.

City State Zip Code
Moorestown NJ 08057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Jet Pulverizer Co. treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 0 7

Transaction ID: 2233667

Amount of Each Receipt this Period
500.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Teresa Meeks

Mailing Address 9 North Street

City State Zip Code
Brookeville MD 20833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Federal Government Research Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232297

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 943 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jeraldine Trabant

Mailing Address 726 Loveville Rd Ap

City State Zip Code
Hockessin DE 19707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237528

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Victoria J Perkins

Mailing Address 11000 Huntover Drive

City State Zip Code
Rockville MD 20852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
B.F. Saul Company Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 7

Transaction ID: 2231154

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Jo Anna Dale

Mailing Address 704 N. Ponca Drive

City State Zip Code
Independence MO 64056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237532

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 944 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Perez		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 704 N. 10th Street		Transaction ID: 2232296	
City Humboldt	State KS	Zip Code 66748	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions	
Name of Employer The Monarch Cement Company	Occupation Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Jane Donawerth		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 7007 Allison Street		Transaction ID: 2233335	
City Hyattsville	State MD	Zip Code 20784	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions	
Name of Employer Professor	Occupation U of MD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Louise Cantrell-Kehoe		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 15971 Charter House Ln		Transaction ID: 2237471	
City Purcellville	State VA	Zip Code 20132	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions	
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 945 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Dorothy M. Nye

Mailing Address 67 Walnut Bottom Road

City State Zip Code
Shippenburg PA 17257

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H & H Chevrolet Auto Parts Clerk

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2233625

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Carole E. Johnson

Mailing Address 669 Garfield Avenue

City State Zip Code
Lake Bluff IL 60044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231761

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Ione Wiedersich

Mailing Address 157 Lakewood Ct

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237521

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 946 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sue Krenek		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2007	
Mailing Address 6 Main Dock		Transaction ID: 2233194	
City State Zip Code Sausalito CA 94965	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation PC World Communications lawyer	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Mary Jane Ellis		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2007	
Mailing Address 225 Clinton Street		Transaction ID: 2237504	
City State Zip Code Saratoga Springs NY 12866	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Dr. Nancy England		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2007	
Mailing Address 593 Knox Road 1300 E.		Transaction ID: 2237529	
City State Zip Code Maquon IL 61458	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 947 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Laura T. Iraci

Mailing Address 1021 Golf Court

City State Zip Code
Mountain View CA 94040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NASA Chemist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232330

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Veronica M Combs

Mailing Address 2232 Gary Drive

City State Zip Code
New Albany IN 47150

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MedTrackAlert Managing editor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 7

Transaction ID: 2231174

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Patricia Reynolds

Mailing Address 1180 Woods CirIce NE

City State Zip Code
Atlanta GA 30324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232435

Amount of Each Receipt this Period
10.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 948 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Kathy Hess

Mailing Address 5616 Freeman Drive

City State Zip Code
Rocklin CA 95677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237530

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marilyn McConnell

Mailing Address 2210 Calhoun Street

City State Zip Code
New Orleans LA 70118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
State of LA RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232912

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Joan E. McCauley

Mailing Address 542 Santa Ana Avenue

City State Zip Code
Newport Beach CA 92663

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231896

Amount of Each Receipt this Period
300.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 949 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Elizabeth Bennett		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 263 Dos Brazos Street		Transaction ID: 2234110	
City State Zip Code Los Alamos NM 87544	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Linda Carlisle		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 5411 Rambling Road		Transaction ID: 2232973	
City State Zip Code Greensboro NC 27409	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Carol Leonard		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 540 Liberty Street		Transaction ID: 2232395	
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 950 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Joyce O. Newcomb

Mailing Address 5355 Pooks Hill Road

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232299

Amount of Each Receipt this Period
20.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Alice Smith

Mailing Address 531 Oneonta Street

City State Zip Code
Shreveport LA 71106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232290

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ellen S. More

Mailing Address 521 Salisbury St

City State Zip Code
Worcester MA 01609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Univ. of Tx. Med. Branch Historian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233360

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 951 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marilyn C. Dahl

Mailing Address 515 Station Road

City Amherst State MA Zip Code 01002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 2233618

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Vesta S. Downer

Mailing Address 509 Hillwood Avenue

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232378

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. June M. Terrell

Mailing Address 1178 Spencer Hill D

City Saint Peters State MO Zip Code 63376

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232940

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 952 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Elizabeth C. VanHorn

Mailing Address 1415 Granville Road

City State Zip Code
Newark OH 43055

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232292

Amount of Each Receipt this Period
20.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Lois T. Phelps

Mailing Address 47 Garrison Avenue

City State Zip Code
Battle Creek MI 49017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USAF Logistician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232288

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Cecelia Gale Sears

Mailing Address 11 Marseilles Court

City State Zip Code
Savannah GA 31419

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233369

Amount of Each Receipt this Period
30.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 953 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Lois J. Scott

Mailing Address 46 Walnut Circle

City Aurora State IL Zip Code 60506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
04 / 30 / 2007

Transaction ID: 2240798

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Yvonne Myles

Mailing Address 2111 Welch St Apt B312

City Houston State TX Zip Code 77019

FEC ID number of contributing federal political committee. **C**

Name of Employer CONOCO Occupation Adminstrative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
04 / 16 / 2007

Transaction ID: 2233372

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Patti Kile

Mailing Address E3412 Bunker Road

City Waupaca State WI Zip Code 54981

FEC ID number of contributing federal political committee. **C**

Name of Employer Thedacare Waupaca Occupation Healthcare

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
04 / 30 / 2007

Transaction ID: 2240791

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 954 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dolores E. Thompson

Mailing Address Indian Palms Country Club
49282 Douglas Street

City State Zip Code
Indio CA 92201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231844

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Nellwyn Doornbos

Mailing Address 2093 Mataro Way

City State Zip Code
San Jose CA 95135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 2 / 2 0 0 7

Transaction ID: 2233910

Amount of Each Receipt this Period
10.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary V. Tobin

Mailing Address 1412 Oak Avenue

City State Zip Code
Evanston IL 60201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Photographer/Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231802

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 955 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Miss Marjorie D. Seward

Mailing Address 435 Martin Terrace

City State Zip Code
State College PA 16803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237428

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Margaret T. Henney

Mailing Address 4212 Queensbury Road

City State Zip Code
Hyattsville MD 20781

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
walker/seal co's electrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2233935

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Charlene Marsh

Mailing Address 9862 Theresa Avenue

City State Zip Code
Anaheim CA 92804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231775

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 956 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Barbara R. Alexander Mailing Address 4200 Bright Rd City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Transaction ID: 2240789 Amount of Each Receipt this Period 25.00 Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Susan Rothenberg Mailing Address 420 12 St H3L City State Zip Code Brooklyn NY 11215 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 7 Transaction ID: 2232430 Amount of Each Receipt this Period 500.00 Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Beth israel Medical center Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Phyllis Freeland Broyles Mailing Address P.O. Box 2216 City State Zip Code McKinleyville CA 95519 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Transaction ID: 2232925 Amount of Each Receipt this Period 40.00 Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 957 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Maud Marie Arend		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 411 Colborne Street		Transaction ID: 2232967
City State Zip Code St. Paul MN 55102	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Dewey		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 200 Lorraine St		Transaction ID: 2231865
City State Zip Code Carrboro NC 27510	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions	
Name of Employer Occupation Chapel Hill City Schools Teacher	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Ruth Swanton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 41 Howard Avenue		Transaction ID: 2233353
City State Zip Code New Haven CT 06519	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions	
Name of Employer Occupation Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 958 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Constance B. Bennett

Mailing Address 200 Ankeny Street

City San Francisco State CA Zip Code 94134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237458

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Carol Spaziani

Mailing Address 409 Crestview Avenue

City Iowa City State IA Zip Code 52245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231772

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Nobuko Ohashi

Mailing Address 10654 Montrose Avenue Apt. 103

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Librarian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232273

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 959 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cheryl Kraywinkel

Mailing Address 401 Westacre Road Apt. 32

City State Zip Code
West Sacramento CA 95691

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233383

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Anne B Ramsay

Mailing Address 20 South 19th St

City State Zip Code
Fernandina Beach FL 32034

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232937

Amount of Each Receipt this Period
200.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Caroline Peters

Mailing Address 5553 Ashby Ct

City State Zip Code
Waterford MI 48327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pontiac Osteopathic Hospital RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237535

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 960 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Andrea Harris Scheidt		Date of Receipt M M / D D / Y Y Y Y 04 / 04 / 2007	
Mailing Address 40 East 80 Street		Transaction ID: 2231758	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Kenyon & Kenyon Occupation Attorney	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Antoinette Whitmore		Date of Receipt M M / D D / Y Y Y Y 04 / 06 / 2007	
Mailing Address 4 Wentworth Road		Transaction ID: 2232418	
City State Zip Code Melrose MA 02176	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Self Employed Occupation Political Consultant	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Ann Chase Hendrie		Date of Receipt M M / D D / Y Y Y Y 04 / 04 / 2007	
Mailing Address 2 Warrens Point Road		Transaction ID: 2231829	
City State Zip Code Little Compton RI 02837	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Hillary Clinton Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 961 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. William E. Thibodeaux

Mailing Address 113 Oakdale Loop

City Houma State LA Zip Code 70360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237514

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Janet Hofmann

Mailing Address 3889 Harvest Drive

City Redwood City State CA Zip Code 94061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231840

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Kathleen M McCormick

Mailing Address 19928 Wissler Ranch Road

City Black Forest State CO Zip Code 80908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233389

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 962 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Rev. Kathryn B. Moore

Mailing Address 1307 Peachwood Lane

City State Zip Code
Bowie MD 20716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237539

Amount of Each Receipt this Period
10.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Lois Carpenter

Mailing Address 12758 County Road 501

City State Zip Code
Bayfield CO 81122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231828

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Margaret Cardoza

Mailing Address 3656 Pine St

City State Zip Code
Castro Valley CA 94546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232409

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 963 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen Costa		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 1122 El Centro Avenue		Transaction ID: 2237518
City State Zip Code Oakland CA 94602	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Ethel A. Plagenz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 1957 W. Island Circle		Transaction ID: 2231848
City State Zip Code Safford AZ 85546	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 12718 Sawdust Drive		Transaction ID: 2232933
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Hillary Clinton Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 964 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Gail B. Stephenson

Mailing Address 112 Orchard Crest Circle

City State Zip Code
Clinton TN 37716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234037

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary T. Zeis

Mailing Address 335 Whispering Pines

City State Zip Code
Loveland OH 45140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Procter & Gamble Chemical Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232337

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary K. McNeive

Mailing Address 333 W Meyer Boulevard
Apt. 1106

City State Zip Code
Kansas City MO 64113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Therapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237531

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 965 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Minnie J. Carson

Mailing Address 12440 Rivercrest Drive

City State Zip Code
Little Rock AR 72212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231799

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Martha Anne Jesnak

Mailing Address 3213 Buttercup Ct

City State Zip Code
Adamstown MD 21710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231818

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
B. Prem

Mailing Address 112 Lundy Lane

City State Zip Code
Lopez Island WA 98261

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232975

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 966 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. June Miller

Mailing Address 10550 Wilshire Blvd Apt 704

City State Zip Code
Los Angeles CA 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232385

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Cheryl Wilfong

Mailing Address 314 Partridge Road

City State Zip Code
E Dummerston VT 05346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232422

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Amelia H. Boss

Mailing Address 309 Westmont Avenue

City State Zip Code
Haddonfield NJ 08033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234014

Amount of Each Receipt this Period
10.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 967 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Martha Whitehead

Mailing Address PO Box 688

City State Zip Code
Longview TX 75606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Good Sheperd Med. Ctr. Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237425

Amount of Each Receipt this Period
1000.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Shirley Peters

Mailing Address 3055 Autumn Court

City State Zip Code
Winter Park FL 32792

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237475

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Kristin L. Menon

Mailing Address PO Box 6116

City State Zip Code
Boulder CO 80306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FINNEGAN, HENDERSON ET AL ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233343

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 968 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Barbara M. Selsor

Mailing Address PO Box 270257

City State Zip Code
Susanville CA 96127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232332

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Nancy J. Hirzel

Mailing Address PO Box 2402

City State Zip Code
Abbeville LA 70511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232922

Amount of Each Receipt this Period
25.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary Louise L Kimball

Mailing Address 301 Linden PondsWay # 105

City State Zip Code
Hingham MA 02043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231763

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 969 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Valerie Rowe

Mailing Address 300 Central Park West 29G

City State Zip Code
New York NY 10024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fordham University Student

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237473

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marilyn Fitzgerald

Mailing Address 1838 Fonthill Ct

City State Zip Code
Mc Lean VA 22102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
American Academy of Physicians Association Exec.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234118

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Haan

Mailing Address P.O. Box 999

City State Zip Code
Waldron WA 98297

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240803

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 970 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Dr. Nona Cannon

Mailing Address 183 Third Avenue # 304

City State Zip Code
Chula Vista CA 91910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237527

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Pauline Andrews

Mailing Address P.O. Box 5487

City State Zip Code
Santa Monica CA 90409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Peoples Group, Inc. Assoc. Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240811

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Rev. Nadean Bishop

Mailing Address 10130 Manning Avenue N

City State Zip Code
Stillwater MN 55082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Univ. Baptist Church Am. Baptist Pastor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233378

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 971 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Pat A. Reynolds

Mailing Address 2910 W Yakima Avenue

City State Zip Code
Yakima WA 98902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2234392

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
M. E. Shank

Mailing Address P.O. Box 450

City State Zip Code
York Harbor ME 03911

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232352

Amount of Each Receipt this Period
50.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Christine A. Smith

Mailing Address P.O. Box 3888

City State Zip Code
La Mesa CA 91944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Central Dupage Hospital Nurse

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 2240796

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► **0.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 972 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Carolyn K. Gusmer

Mailing Address 122 Shadow Lake Drive

City State Zip Code
Waupaca WI 54981

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237506

Amount of Each Receipt this Period
250.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marechal Kaytor

Mailing Address 1055 Harkness Street

City State Zip Code
Manhattan Beach CA 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232961

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. William T. Terrell

Mailing Address 7447 Oxford Court

City State Zip Code
Wichita KS 67226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self economist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231780

Amount of Each Receipt this Period
100.00

Hillary Clinton Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 973 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Kay E MacLaury

Mailing Address 28 Garnsey Road

City Rexford State NY Zip Code 12148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2007

Transaction ID: 2240787

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Deborah J. Nosowsky

Mailing Address 278 Amber Drive

City San Francisco State CA Zip Code 94131

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Government Affairs Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2007

Transaction ID: 2233346

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Julia Field

Mailing Address 180 Berkeley Place

City Brooklyn State NY Zip Code 11217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2007

Transaction ID: 2237430

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 974 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Betty Sancier

Mailing Address 2715 East Park Place

City State Zip Code
Milwaukee WI 53211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231881

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. M. Gay Conklin

Mailing Address P O Box 3795

City State Zip Code
Honolulu HI 96812

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2007

Transaction ID: 2231188

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Dolores E. Thompson

Mailing Address Indian Palms Country Club
49282 Douglas Street

City State Zip Code
Indio CA 92201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231845

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 975 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Katherine A. Kent

Mailing Address 179 Sea Hammock Way

City State Zip Code
Ponte Vedra FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231894

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Diana Bain

Mailing Address 2657 Hemenway Road

City State Zip Code
Bridport VT 05734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMC Computer Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232956

Amount of Each Receipt this Period
75.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Thomas Spofford

Mailing Address 1116 Pearl Street

City State Zip Code
Columbus IN 47201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234041

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 976 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jean J. Robinson

Mailing Address 9840 S Pulaski Road # 321

City State Zip Code
Oak Lawn IL 60453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231813

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Joann Peters

Mailing Address 9832 Lake Haven Circle

City State Zip Code
Fort Worth TX 76108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237454

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Mary H. Black

Mailing Address 9484 SW 92nd Place Road

City State Zip Code
Ocala FL 34481

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237434

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 977 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Bennett

Mailing Address 263 Dos Brazos Street

City State Zip Code
Los Alamos NM 87544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 2234113

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Nola W. Wallace

Mailing Address 947 Stuhr Drive

City State Zip Code
San Gabriel CA 91775

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231756

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sue Ann Anderson

Mailing Address 9340 N. Shore Trail N

City State Zip Code
Forest Lake MN 55025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fairview Lakes Home Caring Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2007

Transaction ID: 2233642

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 978 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Jane Ross

Mailing Address 1789 Woodfield Road

City Mansfield State NJ Zip Code 08836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231871

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Marta VanLoan

Mailing Address 930 W. Arlington Street

City Martinez State CA Zip Code 94553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US Dept. Agriculture Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 2234011

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. George W. Ranney

Mailing Address 91 Prospect Street

City Port Chester State NY Zip Code 10573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NYS Tax Auditor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232405

Amount of Each Receipt this Period
20.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 979 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Barbara J. Gingher

Mailing Address 908 Holly Road

City Belmont State CA Zip Code 94002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237470

Amount of Each Receipt this Period
20.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Carol E. Copeland

Mailing Address 1726 Grant Street

City Berkeley State CA Zip Code 94703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232945

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Terence M. Vinson

Mailing Address 8907 Concho St.

City Houston State TX Zip Code 77036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 7

Transaction ID: 2231164

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 980 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Lisa Perry Hellerstein

Mailing Address 86 Stuyvesant Avenue

City State Zip Code
Larchmont NY 10538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
New York University Administration

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232287

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Gerhard F. Paskusz

Mailing Address 850 Kuhlman Road

City State Zip Code
Houston TX 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of Houston Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2233992

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Patricia Stegman

Mailing Address 245 Dean Street

City State Zip Code
Brooklyn NY 11217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232283

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 981 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Shirley D. Kirkland		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 17 E. 84th Street		Transaction ID: 2234005	
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Eva Herzfeld		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 8232 211th Street		Transaction ID: 2231834	
City State Zip Code Jamaica NY 11427	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Joan Jessop Brewster		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 242 Rivermead Rd		Transaction ID: 2240801	
City State Zip Code Peterborough NH 03458	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 982 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dianne Durrwachter

Mailing Address 809 West 5th Street

City State Zip Code
Port Angeles WA 98363

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232450

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mr. Glenn E Berkovitz

Mailing Address 11929 Windward Avenue

City State Zip Code
Los Angeles CA 90066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Freelance - various Audio technician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234082

Amount of Each Receipt this Period
20.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Elizabeth F Shipley

Mailing Address 805 Hagys Ford Road

City State Zip Code
Narberth PA 19072

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: 2231331

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 983 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Anne Vidaver

Mailing Address 2416 Sewell Street

City Lincoln State NE Zip Code 68502

FEC ID number of contributing federal political committee. **C**

Name of Employer U of NE Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231878

Amount of Each Receipt this Period
 50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Ruth Goldberg

Mailing Address 7673 Cedarwood Circle

City Boca Raton State FL Zip Code 33434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 8 / 2 0 0 7

Transaction ID: 2233628

Amount of Each Receipt this Period
 25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jeanne Thune

Mailing Address 767 St. John S. Way

City Hendersonville State NC Zip Code 28791

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237496

Amount of Each Receipt this Period
 25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 984 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Virginia M. Kuhn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 168 Sterling Point		Transaction ID: 2233645	
City State Zip Code Winston Salem NC 27104	Amount of Each Receipt this Period 18.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Camille Kurtz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2401 Calvert Street NW Apt. 902		Transaction ID: 2238296	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Ethel L. Gould		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 757 Flume Court		Transaction ID: 2232982	
City State Zip Code Milpitas CA 95035	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 985 / 1028
<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Marilyn M. Meardon Mailing Address 24 Rhode Island Avenue City Providence State RI Zip Code 02906 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Transaction ID: 2231857 Amount of Each Receipt this Period 25.00 Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
Name of Employer: RI Comm. for the Humanities Occupation: Actress Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Ms. Gloria T. Hern Mailing Address 7447 Sylmar Avenue City Van Nuys State CA Zip Code 91405 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Transaction ID: 2232348 Amount of Each Receipt this Period 100.00 Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
Name of Employer: Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Mr. S. Michael D. Lunn Mailing Address 1601 Elm Street # 2000 City Dallas State TX Zip Code 75313 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7 Transaction ID: 2233608 Amount of Each Receipt this Period 100.00 Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
Name of Employer: Self Occupation: consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 986 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia Ann Smith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 234 Crescent Drive		Transaction ID: 2237461
City Orinda	State CA	Zip Code 94563
Amount of Each Receipt this Period 50.00		Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Sharon Lewis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 8842 San Badger Way		Transaction ID: 2233382
City Elk Grove	State CA	Zip Code 95624
Amount of Each Receipt this Period 50.00		Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
FEC ID number of contributing federal political committee. C		
Name of Employer Lodi USD	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Carol Kaplan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 711 Adams Street		Transaction ID: 2231853
City Hoboken	State NJ	Zip Code 07030
Amount of Each Receipt this Period 100.00		Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
FEC ID number of contributing federal political committee. C		
Name of Employer Carol Realty	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 987 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Mr. William Swartzchild		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 119 Erledon Road		Transaction ID: 2232339
City State Zip Code Tenafly NJ 07670	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Dr. Laura T. Iraci		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 1021 Golf Court		Transaction ID: 2232331
City State Zip Code Mountain View CA 94040	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation NASA Chemist	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Miriam R. Karger		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 7 Rivermead Road		Transaction ID: 2233364
City State Zip Code Peterborough NH 03458	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 988 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Dolores S. Stickler

Mailing Address 2323 Pittston Ave

City State Zip Code
Scranton PA 18505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232932

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Phyllis J. Cohen

Mailing Address 6619 Mercer Street

City State Zip Code
Houston TX 77005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
City of West University Council Member

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 7 / 2 0 0 7

Transaction ID: 2233893

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Jan E. Schochet

Mailing Address 6511 Falllenbridge Road

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231866

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 989 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Martha P. Poling

Mailing Address 1532 Sinclair Drive

City State Zip Code
McLean VA 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232301

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Victoria J Perkins

Mailing Address 11000 Huntover Drive

City State Zip Code
Rockville MD 20852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
B.F. Saul Company Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 7

Transaction ID: 2231153

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Ethel Sutton

Mailing Address 61 Brown Road

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232953

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 990 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Jane Ellis

Mailing Address 225 Clinton Street

City State Zip Code
Saratoga Springs NY 12866

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237505

Amount of Each Receipt this Period
250.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Patricia Reynolds

Mailing Address 1180 Woods CirIce NE

City State Zip Code
Atlanta GA 30324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232437

Amount of Each Receipt this Period
10.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Sue Krenek

Mailing Address 6 Main Dock

City State Zip Code
Sausalito CA 94965

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PC World Communications lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 7

Transaction ID: 2233191

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 991 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Veronica M Combs

Mailing Address 2232 Gary Drive

City State Zip Code
New Albany IN 47150

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MedTrackAlert Managing editor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 7

Transaction ID: 2231171

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Barbara Krause

Mailing Address 1509 N Garfield Street

City State Zip Code
Arlington VA 22201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Barnes & Noble Bookseller

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232304

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Gayle A. Kaplan

Mailing Address 5929 Walnut Dr

City State Zip Code
Minneapolis MN 55436

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Business Dynamics Inc. Research Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231796

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 992 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Mark Garrett		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 58 Hawthorne Terrace		Transaction ID: 2233380
City State Zip Code Leonia NJ 07605	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation Bell Communication Rese Research Engineer	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Joan E. McCauley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 542 Santa Ana Avenue		Transaction ID: 2231897
City State Zip Code Newport Beach CA 92663	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Mr. Carl E. Langenhop		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 2200 Greentree N. Apt. 1107		Transaction ID: 2237502
City State Zip Code Clarksville IN 47129	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 993 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Marjorie E James

Mailing Address 14416 Tanglewood Dr.

City State Zip Code
Farmers Branch TX 75234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231784

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Joyce O. Newcomb

Mailing Address 5355 Pooks Hill Road

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232300

Amount of Each Receipt this Period
15.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Elsie S. Sweeney

Mailing Address 21775 Woodland Crest Drive

City State Zip Code
Woodland Hills CA 91364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2007

Transaction ID: 2233387

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 994 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Eleanor Weinstock

Mailing Address 525 South Flagler Drive
Apt. 12c

City State Zip Code
West Palm Beach FL 33401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237449

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Mary Jourdan

Mailing Address 2140 Santa Cruz Ave., # E202

City State Zip Code
Menlo Park CA 94025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 2234070

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. Hal C. Reed

Mailing Address 144 Orchard Hill Drive

City State Zip Code
South Windsor CT 06074

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of Connecticut Foundation Development Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 0 7

Transaction ID: 2232432

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 995 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Linda L. Daube		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 50 Scarborough Road		Transaction ID: 2233623	
City State Zip Code Manchester CT 06040	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Community Renewal Team, Inc.	Occupation Registered Dietician	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

B. Full Name (Last, First, Middle Initial) Mrs. Karen O Hofmeister		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 2121 Kirby Drive No 97		Transaction ID: 2231340	
City State Zip Code Houston TX 77019	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Self	Occupation author	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

C. Full Name (Last, First, Middle Initial) Ms. Nancy Fogel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 4881 Cobbler Court		Transaction ID: 2231890	
City State Zip Code Pleasanton CA 94566	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer	Occupation Retired	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 996 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Mrs. Barbara H. Malcolm

Mailing Address 4775 S Harbor Dr Apt 101

City State Zip Code
Vero Beach FL 32967

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232959

Amount of Each Receipt this Period
250.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Edith Hersher

Mailing Address 212 Beers Road

City State Zip Code
Easton CT 06612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2007

Transaction ID: 2237485

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Renate Wasserman

Mailing Address 102 Tonset Road

City State Zip Code
Orleans MA 02653

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2007

Transaction ID: 2233363

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 997 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Suzanne Winn

Mailing Address 1414 Main St

City Lynnfield State MA Zip Code 01940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231765

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Merrilee A. Cate

Mailing Address 4505 N. O'Connor Road

City Irving State TX Zip Code 75062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2007

Transaction ID: 2237464

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Luann Wilkins Abrahams

Mailing Address 45 Walnut Street

City Somerville State MA Zip Code 02143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Harvard University Art Museums
Museum Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231787

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 998 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Charlotte White		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 21100 Gary Drive Apt 102		Transaction ID: 2231888	
City State Zip Code Castro Valley CA 94546		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Judy Lane		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 114 Dennis Whitney Road		Transaction ID: 2233650	
City State Zip Code Oakham MA 01068		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer Occupation REQUESTED		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Priscilla Meyer		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 4424 Athens Avenue		Transaction ID: 2240794	
City State Zip Code Waco TX 76710		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 999 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Ruth Mead

Mailing Address 203 Thorn Hollow Drive

City State Zip Code
Apex NC 27523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ERG Environmental Consulting

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: 2231807

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Laura Caplin Fisher

Mailing Address 44 Broad Brook Road

City State Zip Code
Bedford Hills NY 10507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Artist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237426

Amount of Each Receipt this Period
250.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Dr. Eugene A. Hildreth

Mailing Address 2000 Cambridge Avenue
Apt. 129

City State Zip Code
Wyomissing PA 19610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 2232908

Amount of Each Receipt this Period
250.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1000 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Rothenberg		Date of Receipt M M / D D / Y Y Y Y Y 04 / 07 / 2007	
Mailing Address 420 12 St H3L		Transaction ID: 2232429	
City State Zip Code Brooklyn NY 11215	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Beth israel Medical center Physician	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Constance C. Moore		Date of Receipt M M / D D / Y Y Y Y Y 04 / 04 / 2007	
Mailing Address 419 South Camac Street		Transaction ID: 2231771	
City State Zip Code Philadelphia PA 19147	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Retired	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Ruth Swanton		Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2007	
Mailing Address 41 Howard Avenue		Transaction ID: 2233354	
City State Zip Code New Haven CT 06519	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1001 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Constance B. Bennett

Mailing Address 200 Ankeny Street

City San Francisco State CA Zip Code 94134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2007

Transaction ID: 2237459

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Margaret H Schadler, Ph.D.

Mailing Address 4024 Windsor Drive

City Niskayuna State NY Zip Code 12309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231803

Amount of Each Receipt this Period
250.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Phyllis Freeland Broyles

Mailing Address P.O. Box 2216

City McKinleyville State CA Zip Code 95519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232928

Amount of Each Receipt this Period
40.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1002 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. William E. Thibodeaux		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 113 Oakdale Loop		Transaction ID: 2237515	
City State Zip Code Houma LA 70360	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Homemaker	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) B. Ms. Cheryl Kraywinkel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 401 Westacre Road Apt. 32		Transaction ID: 2233384	
City State Zip Code West Sacramento CA 95691	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

Full Name (Last, First, Middle Initial) C. Ms. Jean F. Reisen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 2 Wentworth Rd.		Transaction ID: 2231863	
City State Zip Code Summit NJ 07901	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions		
Name of Employer Occupation Unemployed	[MEMO ITEM] MEMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1003 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joanna B. Taylor		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 3701 27th Street N.		Transaction ID: 2240806
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Rev. Kathryn B. Moore		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 1307 Peachwood Lane		Transaction ID: 2237540
City State Zip Code Bowie MD 20716	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation REQUESTED	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathleen M McCormick		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 19928 Wissler Ranch Road		Transaction ID: 2233392
City State Zip Code Black Forest CO 80908	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Kirsten Gillibrand Contributions	
Name of Employer Occupation civil service analyst	[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1004 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Mary Cope

Mailing Address 370 Riverside Drive, Apt. 15C

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232354

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Margaret Cardoza

Mailing Address 3656 Pine St

City State Zip Code
Castro Valley CA 94546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232411

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Suzanne Brown

Mailing Address 19650 Timberline Drive

City State Zip Code
Brookfield WI 53045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233339

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1005 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Elizabeth T. Boris		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 3516 Duff Drive		Transaction ID: 2232383	
City Falls Church	State VA	Zip Code 22041	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer Urban Institute	Occupation Research		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
[MEMO ITEM] MEMO			

Full Name (Last, First, Middle Initial) B. Ms. Marie Louis Blount		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 35 Young Avenue		Transaction ID: 2232350	
City Croton Hdsn	State NY	Zip Code 10520	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer New York University	Occupation Associate Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
[MEMO ITEM] MEMO			

Full Name (Last, First, Middle Initial) C. Ms. Judy Dudley		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 349 Arthur Ave		Transaction ID: 2232325	
City Aptos	State CA	Zip Code 95003	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer Santa Cruz County, CA	Occupation Legal Clerk		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
[MEMO ITEM] MEMO			

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1006 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial) Ms. Kathryn Kuehl		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 3400 Sullivan Court Apt.175		Transaction ID: 2232949
City Modesto State CA Zip Code 95356	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
Name of Employer California Department of Corrections Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Personnel Analyst Aggregate Year-to-Date ▼ 0.00	

B. Full Name (Last, First, Middle Initial) Ms. Mignon S Adams		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 1922 Pemberton Street		Transaction ID: 2231795
City Philadelphia State PA Zip Code 19146	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
Name of Employer Univ. of Sciences in Philadelphia Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Librarian Aggregate Year-to-Date ▼ 0.00	

C. Full Name (Last, First, Middle Initial) Ms. Barbara Lindblom		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 1915 Diamond Court		Transaction ID: 2233349
City Santa Rosa State CA Zip Code 95404	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions [MEMO ITEM] MEMO
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1007 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Martha Anne Jesnak

Mailing Address 3213 Buttercup Ct

City Adamstown State MD Zip Code 21710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231819

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Mrs. Clay Kenan Kirk

Mailing Address 320 East 72nd St., Apt. 5C

City New York State NY Zip Code 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investment Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2007

Transaction ID: 2232920

Amount of Each Receipt this Period
1000.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mr. James Douglas

Mailing Address 32 Lenox Road # C8

City Brooklyn State NY Zip Code 11226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 2232320

Amount of Each Receipt this Period
20.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1008 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Cheryl Wilfong

Mailing Address 314 Partridge Road

City State Zip Code
E Dummerston VT 05346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 2232424

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Molly Oberbillig

Mailing Address 1907 Parkwood Drive SE

City State Zip Code
Olympia WA 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 2233341

Amount of Each Receipt this Period
25.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Mrs. Barbara J Corwin

Mailing Address 1230 Winding Ridge Terrace

City State Zip Code
Colorado Springs CO 80919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sun Microsystems, Inc SW Engineering Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237490

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1009 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. B. Prem		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7	
Mailing Address 112 Lundy Lane		Transaction ID: 2232978	
City State Zip Code Lopez Island WA 98261		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Shirley Peters		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 3055 Autumn Court		Transaction ID: 2237479	
City State Zip Code Winter Park FL 32792		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Paula Roloff		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7	
Mailing Address 19 Acacia Lane		Transaction ID: 2232335	
City State Zip Code Redwood City CA 94062		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer Occupation Retired		[MEMO ITEM] MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1010 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kristin L. Menon		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address PO Box 6116		Transaction ID: 2233344	
City Boulder	State CO	Zip Code 80306	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer FINNEGAN, HENDERSON ET AL	Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Ms. Joan E. Best		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address PO Box 412		Transaction ID: 2231762	
City Brightwaters	State NY	Zip Code 11718	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Ms. Marilyn Fitzgerald		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1838 Fonthill Ct		Transaction ID: 2234117	
City Mc Lean	State VA	Zip Code 22102	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Kirsten Gillibrand Contributions	
Name of Employer American Academy of Physicians		Occupation Association Exec.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		[MEMO ITEM] MEMO	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1011 / 1028
	<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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Pauline Andrews

Mailing Address P.O. Box 5487

City State Zip Code
Santa Monica CA 90409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Peoples Group, Inc. Assoc. Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2007

Transaction ID: 2240814

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Dr. Janet T. Spence

Mailing Address P.O. Box 465

City State Zip Code
Dennis MA 02638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 2233995

Amount of Each Receipt this Period
100.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Full Name (Last, First, Middle Initial)
Ms. Karen D. Mahan

Mailing Address 2801 Patricia Avenue

City State Zip Code
Antioch CA 94509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Atascadero School Distric School Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2007

Transaction ID: 2237463

Amount of Each Receipt this Period
50.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1012 / 1028
	(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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jane Case Einbender

Mailing Address 10 MacDougal Alley

City State Zip Code
New York NY 10011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2007

Transaction ID: 2233377

Amount of Each Receipt this Period
15.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Full Name (Last, First, Middle Initial)
Ms. Barbara Debs

Mailing Address 1 Beekman Place # 7A

City State Zip Code
New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2007

Transaction ID: 2231753

Amount of Each Receipt this Period
1000.00

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	510642.50

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1013 / 1028
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" 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)
EMILY's List

A. Full Name (Last, First, Middle Initial)
DCCC

Mailing Address 430 South Capitol Street, S.E.

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	0	7

Transaction ID: 2233120

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	1500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1014 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
AFL-CIO COPE

Mailing Address 815 16th Street, N.W.

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 7

Transaction ID: 2239309

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
AFSCME PAC

Mailing Address 555 New Jersey Avenue NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 5 / 2 0 0 7

Transaction ID: 2232129

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
WCF PAC

Mailing Address 734 15th Street NW Ste. 500

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 3 / 2 0 0 7

Transaction ID: 2237260

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **10250.00**

TOTAL This Period (last page this line number only) ► **10250.00**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1015 / 1028
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Laila Mohib		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7
Mailing Address 616 E Street N.W. Apt 712		Transaction ID: 5146
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 14.16	
FEC ID number of contributing federal political committee. C	Postage at Fair Market Value	
Name of Employer Occupation	Original Vendor US Postal Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. Grassroots Solutions		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 1120 Connecticut Ave, NW Suite 1100		Transaction ID: 5120
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 4200.00	
FEC ID number of contributing federal political committee. C	Sublease Rent at Fair Market Value	
Name of Employer Occupation	Original Vendor: Jack Bender	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. Grassroots Solutions		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 1120 Connecticut Ave, NW Suite 1100		Transaction ID: 5121
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 10.89	
FEC ID number of contributing federal political committee. C	Postage at Fair Market Value	
Name of Employer Occupation	Orig Vendor: US Postal Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional) ▶	4225.05
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1016 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Grassroots Solutions

Mailing Address 1120 Connecticut Ave, NW
Suite 1100

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 5122

Amount of Each Receipt this Period
74.18

Telephone at Fair Market Value

Orig Vendor: Working Assets

B. Full Name (Last, First, Middle Initial)
Grassroots Solutions

Mailing Address 1120 Connecticut Ave, NW
Suite 1100

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 5123

Amount of Each Receipt this Period
83.50

Office Supplies at Fair Market Value

Orig Vendor: Ikon Office Supplies

C. Full Name (Last, First, Middle Initial)
Grassroots Solutions

Mailing Address 1120 Connecticut Ave, NW
Suite 1100

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 5124

Amount of Each Receipt this Period
210.00

Parking at Fair Market Value

Orig Vendor Colonial Parking

SUBTOTAL of Receipts This Page (optional) ► **367.68**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1017 / 1028
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Amie Kershner- Murray		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 3114 E. Baltimore St		Transaction ID: 5125	
City State Zip Code Baltimore MD 21224	Amount of Each Receipt this Period 0.19		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Orig Vendor: Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) B. Ellen Malcolm		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 1120 Connecticut Ave, NW		Transaction ID: 5126	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 0.81		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Orig Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) C. Ellen Malcolm		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 1120 Connecticut Ave, NW		Transaction ID: 5127	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 33.35		
FEC ID number of contributing federal political committee. C	Shipping at Fair Market Value		
Name of Employer Occupation	Original Vendor UPS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

SUBTOTAL of Receipts This Page (optional) ▶	34.35
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1018 / 1028
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Martha McKenna		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 913 S. Decker St		Transaction ID: 5128	
City State Zip Code Baltimore MD 21224	Amount of Each Receipt this Period 0.20		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) B. Jennifer Sanford		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 802 H Gallop Hill Road		Transaction ID: 5129	
City State Zip Code Gaithersburg MD 20879	Amount of Each Receipt this Period 5.30		
FEC ID number of contributing federal political committee. C	Postage at Fair Market Value		
Name of Employer Occupation	Original Vendor US Postal Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) C. Dana Jones		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 21766 Cypress Valley Terrace		Transaction ID: 5130	
City State Zip Code Sterling VA 20166	Amount of Each Receipt this Period 8.90		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

SUBTOTAL of Receipts This Page (optional) ▶	14.40
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1019 / 1028
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dana Jones		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2007	
Mailing Address 21766 Cypress Valley Terrace		Transaction ID: 5131	
City State Zip Code Sterling VA 20166	Amount of Each Receipt this Period 1.17		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor US Postal Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) B. Dave McGonagle		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2007	
Mailing Address 4857 Battery Lane Apartment 506		Transaction ID: 5132	
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 0.03		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) C. Mary Jane Volk		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2007	
Mailing Address 541 E. Nelson Avenue		Transaction ID: 5133	
City State Zip Code Alexandria VA 22301	Amount of Each Receipt this Period 1.16		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

SUBTOTAL of Receipts This Page (optional) ▶	2.36
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1020 / 1028
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Susan Markham		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 1402 Emerson Street, NW		Transaction ID: 5134	
City State Zip Code Washington DC 20011	Amount of Each Receipt this Period 0.03		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) B. Susan Markham		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 1402 Emerson Street, NW		Transaction ID: 5135	
City State Zip Code Washington DC 20011	Amount of Each Receipt this Period 3.33		
FEC ID number of contributing federal political committee. C	Postage at Fair Market Value		
Name of Employer Occupation	Original Vendor US Postal Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) C. Britt Cocanour		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 6606 Allegheny Ave		Transaction ID: 5136	
City State Zip Code Takoma Park MD 20912	Amount of Each Receipt this Period 1.04		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

SUBTOTAL of Receipts This Page (optional) ▶	4.40
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1021 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Britt Cocanour

Mailing Address 6606 Allegheny Ave

City State Zip Code
Takoma Park MD 20912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 7

Transaction ID: 5137

Amount of Each Receipt this Period
5.82

Postage at Fair Market Value

Original Vendor US Postal Service

B. Full Name (Last, First, Middle Initial)
Britt Cocanour

Mailing Address 6606 Allegheny Ave

City State Zip Code
Takoma Park MD 20912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 7

Transaction ID: 5138

Amount of Each Receipt this Period
18.46

Shipping at Fair Market Value

Original Vendor UPS

C. Full Name (Last, First, Middle Initial)
Lisa Robillard

Mailing Address 4326 South 36th Street

City State Zip Code
Arlington VA 22206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 7

Transaction ID: 5139

Amount of Each Receipt this Period
2.60

Postage at Fair Market Value

Original Vendor US Postal Service

SUBTOTAL of Receipts This Page (optional) ► **26.88**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1022 / 1028
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lisa Robillard		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 4326 South 36th Street		Transaction ID: 5140	
City State Zip Code Arlington VA 22206	Amount of Each Receipt this Period 11.68		
FEC ID number of contributing federal political committee. C	Shipping at Fair Market Value		
Name of Employer Occupation	Original Vendor UPS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) B. Joanne Wilson		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 3806 Viser Court		Transaction ID: 5141	
City State Zip Code Bowie MD 20715	Amount of Each Receipt this Period 0.48		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) C. Becca Runyan		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 1503 30th Street NW Apt 1		Transaction ID: 5142	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 64.99		
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value		
Name of Employer Occupation	Original Vendor Working Assets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

SUBTOTAL of Receipts This Page (optional) ▶	77.15
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1023 / 1028
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Colleen Medlock		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 2400 16th Street NW #344		Transaction ID: 5143	
City Washington State DC Zip Code 20009	Amount of Each Receipt this Period 5.20		
FEC ID number of contributing federal political committee. C		Postage at Fair Market Value	
Name of Employer	Occupation	Original Vendor US Postal Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) B. Ha Hoa Dang		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 2741 Woodley Place		Transaction ID: 5144	
City Falls Church State VA Zip Code 22046	Amount of Each Receipt this Period 1.04		
FEC ID number of contributing federal political committee. C		Postage at Fair Market Value	
Name of Employer	Occupation	Original Vendor US Postal Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) C. Kellie Dupree		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 1644 Florida Ave. N.W.		Transaction ID: 5145	
City Washington State DC Zip Code 20009	Amount of Each Receipt this Period 1.30		
FEC ID number of contributing federal political committee. C		Postage at Fair Market Value	
Name of Employer	Occupation	Original Vendor US Postal Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional) ▶	7.54
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1024 / 1028
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Grassroots Solutions

Mailing Address 1120 Connecticut Ave, NW
Suite 1100

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: 5152

Amount of Each Receipt this Period
4200.00

Rent at Fair Market Value

Orig Vendor Jack Bender

B. Full Name (Last, First, Middle Initial)
American List Counsel

Mailing Address PO Box 32189

City State Zip Code
Hartford CT 06510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 5153

Amount of Each Receipt this Period
199.46

List Rental Refund

At Fair Market Value

C. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address 1050 Connecticut Ave, NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 0 7

Transaction ID: 5155

Amount of Each Receipt this Period
366.70

Postage Refund

Fair Market Value

SUBTOTAL of Receipts This Page (optional) ► **4766.16**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1025 / 1028
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. US Post Office		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address 1050 Connecticut Ave, NW		Transaction ID: 5154
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 177.94	
FEC ID number of contributing federal political committee. C	Postage Refund	
Name of Employer Occupation	Fair Market Value	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. Ramona Oliver		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 10012 Dallas Avenue		Transaction ID: 5156
City State Zip Code Silver Spring MD 20901	Amount of Each Receipt this Period 16.88	
FEC ID number of contributing federal political committee. C	Travel Reimbursement at FMV	
Name of Employer Occupation	Orig Vendor American Express	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional) ▶	194.82
TOTAL This Period (last page this line number only) ▶	9720.79

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1026 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2007
Mailing Address 1501 Pennsylvania Ave, NW		Transaction ID: 5147
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 229.71	
FEC ID number of contributing federal political committee. C	Interest	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 830.11	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2007
Mailing Address 1501 Pennsylvania Ave, NW		Transaction ID: 5148
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 3126.87	
FEC ID number of contributing federal political committee. C	Sweep Interest	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 9913.73	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Merrill Lynch		Date of Receipt M M / D D / Y Y Y Y 04 / 03 / 2007
Mailing Address 1850 K Street, NW		Transaction ID: 5150
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1067.98	
FEC ID number of contributing federal political committee. C	Sale of 40 shares of Microsoft Corp	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Cntrb C. S. Cummer reported 4/2/07	

SUBTOTAL of Receipts This Page (optional) ▶	4424.56
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1027 / 1028
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Merrill Lynch		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1850 K Street, NW		Transaction ID: 5200	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 4067.93		
FEC ID number of contributing federal political committee. C	Sales of 100 Shs Hewlett Packard Co.		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		
		Cntrb H. Poulter reported 4/25/07	

Full Name (Last, First, Middle Initial) B. Merrill Lynch		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7	
Mailing Address 1850 K Street, NW		Transaction ID: 5149	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 23.23		
FEC ID number of contributing federal political committee. C	Dividend		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 64.73		

Full Name (Last, First, Middle Initial) C. Fifth Third Bancorp		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 2 North La Salle		Transaction ID: 5151	
City State Zip Code Chicago IL 60402	Amount of Each Receipt this Period 6.30		
FEC ID number of contributing federal political committee. C	Dividend		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12.30		

SUBTOTAL of Receipts This Page (optional) ▶	4097.46
TOTAL This Period (last page this line number only) ▶	8522.02

Image# 27930725238

Form/Schedule: **H4& 21B** No expenditures reported on Lines 21a or 21b were made on behalf of federal candidates.

Transaction ID:
