

EMILY's List

1120 Connecticut Avenue NW

Ste 1100

Washington

DC

20036

FEC ID No. C00193433

☒ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 3

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
EMILY's List

FEC IDENTIFICATION NUMBER

C C00193433

Check if ☒ 24-hour notice ☐ 48-hour notice

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

Compass Media Group, Inc.

Date

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 6

Amount

372.75

Mailing Address

1415 North Dayton, Suite 311

City

Chicago

State

IL

Zip Code

60622

Purpose of Expenditure

Postage

Category/
Type

004

Office Sought: ☒ House

State: TN

☐ Senate

District: 09

☐ PresidentialCheck One: ☒ Support ☐ OpposeDisbursement For: ☒ Primary ☐ General 2006☐ Other (specify) : _____

Transaction ID: SE24-86286

Calendar Year-To-Date Per Election

85146.47

for Office Sought

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

Compass Media Group, Inc.

Date

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 6

Amount

7082.25

Mailing Address

1415 North Dayton, Suite 311

City

Chicago

State

IL

Zip Code

60622

Purpose of Expenditure

Postage

Category/
Type

004

Office Sought: ☒ House

State: TN

☐ Senate

District: 09

☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☒ Primary ☐ General 2006☐ Other (specify) : _____

Transaction ID: SE24-86287

Calendar Year-To-Date Per Election

38142.98

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

7455.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

Signature

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
EMILY's List

FEC IDENTIFICATION NUMBER

C C00193433

Check if ☒ 24-hour notice ☐ 48-hour notice

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

Compass Media Group, Inc.

Date

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 6

Amount

627.65

Mailing Address

1415 North Dayton, Suite 311

City

Chicago

State

IL

Zip Code

60622

Purpose of Expenditure

Printing

Category/
Type

004

Office Sought: ☒ House

State: TN

☐ Senate

District: 09

☐ PresidentialCheck One: ☒ Support ☐ OpposeDisbursement For: ☒ Primary ☐ General 2006☐ Other (specify) : _____

Transaction ID: SE24-86288

Calendar Year-To-Date Per Election

85146.47

for Office Sought

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

Compass Media Group, Inc.

Date

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 6

Amount

11925.35

Mailing Address

1415 North Dayton, Suite 311

City

Chicago

State

IL

Zip Code

60622

Purpose of Expenditure

Printing

Category/
Type

004

Office Sought: ☒ House

State: TN

☐ Senate

District: 09

☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☒ Primary ☐ General 2006☐ Other (specify) : _____

Transaction ID: SE24-86289

Calendar Year-To-Date Per Election

38142.98

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

12553.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

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Caroline Fines

Signature

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :**FEC ID No.**☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

PAGE OF 3 / 3

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
EMILY's List**FEC IDENTIFICATION NUMBER****C** C00193433Check if ☒ 24-hour notice ☐ 48-hour notice

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

Stone's Phones

Date

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 6

Amount

1408.92

Mailing Address

121 S. Palm Canyon Drive
Suite 205

City

Palm Springs

State

CA

Zip Code

92262

Purpose of Expenditure

Phone Banks

Category/
Type

004

Office Sought:

☒ House

State: TN

☐ Senate

District: 09

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Nikki Tinker

Disbursement For:

☒ Primary☐ General

2006

☐ Other (specify) : _____

Calendar Year-To-Date Per Election

85146.47

for Office Sought

Transaction ID: SE24-86290

(a) SUBTOTAL of Itemized Independent Expenditures

1408.92

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

21416.92

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 Fines

Signature

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 6