

# 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

Forward Together PAC

ADDRESS (number and street) 201 North Union Street  
Suite 300  
Alexandria VA 22314

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00412791

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day **PRE-Election** Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day **Post -Election** Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2010 through 09 30 2010

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 Honorable Gerald S McGowan

Signature of Treasurer Electronically Filed by Honorable Gerald S McGowan Date 10 20 2010

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

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

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

Write or Type Committee Name  
Forward Together PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		889763.37
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	711554.27									
(c) Total Receipts (from Line 19) .....	65339.85	318365.65								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	776894.12	1208129.02								
7. Total Disbursements (from Line 31) .....	83248.06	514482.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	693646.06	693646.06								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Forward Together PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	3150.00	81550.21
(ii) Unitemized .....	3120.00	5752.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	6270.00	87302.71
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	42000.00	97500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	48270.00	184802.71
12. Transfers From Affiliated/Other Party Committees .....	17000.00	125500.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	7500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	69.85	562.94
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	65339.85	318365.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	65339.85	318365.65

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	15498.06	276032.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	15498.06	276032.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	63500.00	207000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	12500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	2500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	15000.00
29. Other Disbursements.....	4250.00	16450.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	83248.06	514482.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	83248.06	514482.96

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 37

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) .....	48270.00	184802.71
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	15000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	48270.00	169802.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15498.06	276032.96
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15498.06	276032.96

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 37
	<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)  
Forward Together PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Jack M. Horn, Sr.		Date of Receipt	
	Mailing Address 700 Highland Ave		M M / D D / Y Y Y Y Y 09 / 13 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> C3323372
	Charlottesville	VA	22903-4015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		500.00	
	Name of Employer Martin Horn, Inc.		Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Willard J. Moody, Sr.		Date of Receipt	
	Mailing Address 500 Crawford St Ste 300		M M / D D / Y Y Y Y Y 09 / 02 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> C3319894
	Portsmouth	VA	23704-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		400.00	
	Name of Employer Self Employed		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Taylor Mason		Date of Receipt	
	Mailing Address 12 Bayberry Ln		M M / D D / Y Y Y Y Y 09 / 23 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> C3336812A
	Williamsburg	VA	23185-3406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		500.00	
	Name of Employer Visa Inc.		Occupation Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

\* Earmarked Contribution:  
See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 37

(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)  
Forward Together PAC

**A.**

Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address 14 Arrow St

City State Zip Code  
Cambridge MA 02138-5106

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5170.00

Date of Receipt 09 / 30 / 2010

**Transaction ID:** C3336812AB

Amount of Each Receipt this Period 500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)  
Charles C Adams, Jr.

Mailing Address 3, rue Francois Bellot  
1206 Geneva, Switzerland

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Akin Gump Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2010

**Transaction ID:** C3336796A

Amount of Each Receipt this Period 1000.00

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address 14 Arrow St

City State Zip Code  
Cambridge MA 02138-5106

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5170.00

Date of Receipt 09 / 30 / 2010

**Transaction ID:** C3336796AB

Amount of Each Receipt this Period 1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 37  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert Musser

Mailing Address 400 Madison St  
Apt 702

City State Zip Code  
Alexandria VA 22314-1745

FEC ID number of contributing federal political committee. C

Name of Employer N/A 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  
09 / 20 / 2010

**Transaction ID:** C3336797A

Amount of Each Receipt this Period 500.00

\* Earmarked Contribution: See Below

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

Mailing Address 14 Arrow St

City State Zip Code  
Cambridge MA 02138-5106

FEC ID number of contributing federal political committee. C

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5170.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3336797AB

Amount of Each Receipt this Period 500.00

[MEMO ITEM]  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
William J. Collis

Mailing Address 17346 Holmes Dr

City State Zip Code  
Brookings OR 97415-8199

FEC ID number of contributing federal political committee. C

Name of Employer WorldFish Occupation Biologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 15 / 2010

**Transaction ID:** C3330188A

Amount of Each Receipt this Period 250.00

\* Earmarked Contribution: See Below

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 9 / 37</span>	
	(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)  
Forward Together PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt
	Mailing Address 14 Arrow St		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Cambridge	MA	02138-5106
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: C3330188AB
		Conduit total listed in Agg. field	
Receipt For:		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="5170.00"/>	<input type="text" value="250.00"/>
<input type="checkbox"/> Other (specify) ▼			<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="3150.00"/>

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

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

FOR LINE NUMBER: PAGE 10 / 37  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
JPMorgan Chase & Co. PAC

Mailing Address 10 S Dearborn St  
IL 1-0520

City State Zip Code  
Chicago IL 60603-2300

FEC ID number of contributing federal political committee. **C** C00128512

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
0	9	/	3	0	/	2	0	1	0

**Transaction ID:** C3596390

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
American Insurance Association PAC

Mailing Address 1130 Connecticut Ave NW  
Ste 1000

City State Zip Code  
Washington DC 20036-3910

FEC ID number of contributing federal political committee. **C** C00103143

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

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

**Transaction ID:** C3596391

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Title Industry PAC

Mailing Address 1828 L St NW  
Ste 705

City State Zip Code  
Washington DC 20036-5107

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	1	0

**Transaction ID:** C3335541

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8000.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 37  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
American Resort Development Assoc PAC

Mailing Address 1201 15th St NW  
Fl 4

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C** C00129932

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 30 / 2010  
**Transaction ID:** C3596393  
 Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
United Services Automobile Assoc Employee PAC

Mailing Address 9800 Fredericksburg Rd  
Rm 501

City San Antonio State TX Zip Code 78288-0001

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 30 / 2010  
**Transaction ID:** C3596394  
 Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
Natl Assoc of Real Estate Investment Trusts PAC

Mailing Address 1875 I St NW  
Ste 600

City Washington State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 28 / 2010  
**Transaction ID:** C3335544  
 Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 37
	<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)  
Forward Together PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Natl Assoc Of Mutual Insurance Companies PAC	Date of Receipt MM / DD / YYYY 09 / 28 / 2010
	Mailing Address 3601 Vincennes Rd PO Box 68700	<b>Transaction ID:</b> C3335535
	City Indianapolis State IN Zip Code 46268-1154	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00170258	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Employees Of Northrop Grumman Corp PAC	Date of Receipt MM / DD / YYYY 09 / 02 / 2010
	Mailing Address 3699 Wilshire Blvd Ste 1290	<b>Transaction ID:</b> C3319895
	City Los Angeles State CA Zip Code 90010-2732	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00088591	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Comcast Corporation PAC	Date of Receipt MM / DD / YYYY 09 / 02 / 2010
	Mailing Address 1701 John F Kennedy Blvd	<b>Transaction ID:</b> C3319915
	City Philadelphia State PA Zip Code 19103-2838	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00248716	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 13 / 37  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
International Council Of Shopping Centers, Inc.PAC

Mailing Address 1399 New York Ave NW  
Ste 720

City Washington State DC Zip Code 20005-4778

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

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 9 / 2 8 / 2 0 1 0

**Transaction ID:** C3335546

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
United Health Group Inc. PAC (United for Health)

Mailing Address 9900 Bren Rd E

City Minnetonka State MN Zip Code 55343-9664

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 0 2 / 2 0 1 0

**Transaction ID:** C3319896

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Comcast Corporation PAC

Mailing Address 1701 John F Kennedy Blvd

City Philadelphia State PA Zip Code 19103-2838

FEC ID number of contributing federal political committee. **C** C00248716

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 9 / 0 2 / 2 0 1 0

**Transaction ID:** C3319916

Amount of Each Receipt this Period  
2500.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 37  
(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)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
National Multi Housing Council PAC

Mailing Address 1850 M St NW  
Ste 540

City Washington State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2010

**Transaction ID:** C3335537

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Property Casualty Insurers Assoc. of America PAC

Mailing Address 2600 S River Rd

City Des Plaines State IL Zip Code 60018-3203

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** C3596389

Amount of Each Receipt this Period  
3500.00

**C.** Full Name (Last, First, Middle Initial)  
Mortgage Bankers Assoc PAC

Mailing Address 1919 Pennsylvania Ave NW  
Fl 8

City Washington State DC Zip Code 20006-3404

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2010

**Transaction ID:** C3335539

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10500.00

**TOTAL** This Period (last page this line number only) ..... ► 42000.00

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

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

FOR LINE NUMBER: PAGE 15 / 37  
(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)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Forward Together Warner Committee

Mailing Address 201 N Union St  
Ste 300

City State Zip Code  
Alexandria VA 22314-2650

FEC ID number of contributing federal political committee. **C** C00481846

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125500.00

Date of Receipt  

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

**Transaction ID:** C3331256

Amount of Each Receipt this Period  
17000.00

**B.** Full Name (Last, First, Middle Initial)  
David A. Castagnetti

Mailing Address 1341 G St NW  
Ste 1100

City State Zip Code  
Washington DC 20005-3105

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

Name of Employer Occupation  
Mehlman Vogel Castagnetti Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID:** C3331280

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
Mary Elizabeth Donahue

Mailing Address 124 Quincy St

City State Zip Code  
Chevy Chase MD 20815-3321

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

Name of Employer Occupation  
American Health Insurance Plans Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

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

**Transaction ID:** C3331261

Amount of Each Receipt this Period  
750.00

**[MEMO ITEM]**  
\*

**SUBTOTAL** of Receipts This Page (optional) ..... ► **17000.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 37  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Richard P. Sowers, III  
Mailing Address 4800 Pocahontas Ave

City State Zip Code  
Richmond VA 23226-1723

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

Name of Employer Patient First Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 23 / 2010  
Transaction ID: C3331271  
Amount of Each Receipt this Period: 500.00

**[MEMO ITEM]**  
\*

**B.** Full Name (Last, First, Middle Initial)  
Robert M. Bass  
Mailing Address 201 Main St

City State Zip Code  
Fort Worth TX 76102-3105

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

Name of Employer Keystone, Inc. Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 23 / 2010  
Transaction ID: C3331292  
Amount of Each Receipt this Period: 2500.00

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
Carmella A. Bocchino  
Mailing Address 820 S Fairfax St

City State Zip Code  
Alexandria VA 22314-4312

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

Name of Employer AHIP Occupation Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 23 / 2010  
Transaction ID: C3331263  
Amount of Each Receipt this Period: 750.00

**[MEMO ITEM]**  
\*

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 37  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

**A.** Full Name (Last, First, Middle Initial)  
Hilton Worldwide PAC

Mailing Address 7930 Jones Branch Dr  
Ste 1100

City State Zip Code  
Mc Lean VA 22102-3388

FEC ID number of contributing federal political committee. **C** C00213074

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2010

**Transaction ID:** C3331274

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
\*

**B.** Full Name (Last, First, Middle Initial)  
H. Benson Dendy, III

Mailing Address 1142 West Ave

City State Zip Code  
Richmond VA 23220-3720

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

Name of Employer Occupation  
The Vectre Corporation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2010

**Transaction ID:** C3331276

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
Roger W. Sant

Mailing Address 2929 N St NW

City State Zip Code  
Washington DC 20007-3342

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

Name of Employer Occupation  
N/A Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2010

**Transaction ID:** C3331269

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\*

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 37
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Forward Together Warner Committee - Unitemized		Date of Receipt
	Mailing Address 201 N Union St Ste 300		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Alexandria	State VA	Zip Code 22314-2650
	FEC ID number of contributing federal political committee. <b>C</b> C00481846		Transaction ID: CZ3331256
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="100.00"/>	
Aggregate Year-to-Date ▼		<input type="text" value="100.00"/>	
			<b>[MEMO ITEM]</b> *

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="17000.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 19 / 37	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Wachovia, NA		Date of Receipt
	Mailing Address 301 N Washington St		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Alexandria	VA	22314-2501
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: C3369678
Receipt For:		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="562.94"/>	<input type="text" value="69.85"/>
<input type="checkbox"/> Other (specify) ▼			* Interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="69.85"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="69.85"/>

**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)  
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D218604 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Pittsburgh State PA Zip Code 15250-7461	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping Candidate Name	<input type="text" value="93.64"/>
	Office Sought: <input type="checkbox"/> House <input 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) Federal Express	Transaction ID: D219779 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="09"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Pittsburgh State PA Zip Code 15250-7461	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping Candidate Name	<input type="text" value="18.80"/>
	Office Sought: <input type="checkbox"/> House <input 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) Federal Express	Transaction ID: D220104 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Pittsburgh State PA Zip Code 15250-7461	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping Candidate Name	<input type="text" value="40.75"/>
	Office Sought: <input type="checkbox"/> House <input 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="153.19"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 37

<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)  
Forward Together PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 371461</p> <p>City Pittsburgh State PA Zip Code 15250-7461</p> <p>Purpose of Disbursement Shipping</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D220106</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.80"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) LexisNexis</p> <p>Mailing Address PO Box 72477090</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Internet Research Services</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D219056</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="242.25"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 5800 Windward Pkwy</p> <p>City Alpharetta State GA Zip Code 30005-8802</p> <p>Purpose of Disbursement Payroll Service Charge</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D219080</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="82.43"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 37

<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)  
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D219081 Date of Disbursement 09 / 15 / 2010
	Mailing Address 5800 Windward Pkwy	Amount of Each Disbursement this Period 394.55
	City Alpharetta State GA Zip Code 30005-8802	
	Purpose of Disbursement Payroll Taxes	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) ADP	Transaction ID: D220355 Date of Disbursement 09 / 30 / 2010
	Mailing Address 5800 Windward Pkwy	Amount of Each Disbursement this Period 394.55
	City Alpharetta State GA Zip Code 30005-8802	
	Purpose of Disbursement Payroll Taxes	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) ADP	Transaction ID: D220357 Date of Disbursement 09 / 30 / 2010
	Mailing Address 5800 Windward Pkwy	Amount of Each Disbursement this Period 82.43
	City Alpharetta State GA Zip Code 30005-8802	
	Purpose of Disbursement Payroll Service Charge	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>871.53</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 37

<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)  
Forward Together PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 5800 Windward Pkwy</p> <p>City Alpharetta State GA Zip Code 30005-8802</p> <p>Purpose of Disbursement Payroll Service Charge</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D220572</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Columbia Capital, LLC</p> <p>Mailing Address 201 N Union St STE 300</p> <p>City Alexandria State VA Zip Code 22314-2650</p> <p>Purpose of Disbursement Rent</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D201469</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="650.35"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) ActBlue</p> <p>Mailing Address 14 Arrow St</p> <p>City Cambridge State MA Zip Code 02138-5106</p> <p>Purpose of Disbursement Service Fee</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D220890</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="118.59"/></p>

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

**775.94**

**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)

PAGE 24 / 37

<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)  
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) ActBlue	Transaction ID: D220251 Date of Disbursement 09 / 23 / 2010
	Mailing Address 14 Arrow St	Amount of Each Disbursement this Period 82.84
	City Cambridge State MA Zip Code 02138-5106	
	Purpose of Disbursement Service Fee 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) ActBlue	Transaction ID: D219048 Date of Disbursement 09 / 10 / 2010
	Mailing Address 14 Arrow St	Amount of Each Disbursement this Period 0.99
	City Cambridge State MA Zip Code 02138-5106	
	Purpose of Disbursement Service Fee 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) ActBlue	Transaction ID: D222143 Date of Disbursement 09 / 30 / 2010
	Mailing Address 14 Arrow St	Amount of Each Disbursement this Period 1.98
	City Cambridge State MA Zip Code 02138-5106	
	Purpose of Disbursement Service Fee 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	85.81
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)  
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)  
NGP Software, Inc.

Transaction ID: D220635  
Date of Disbursement

Mailing Address 1225 I St NW  
Ste 1225

09 / 28 / 2010

City Washington State DC Zip Code 20005-5918

Amount of Each Disbursement this Period

1096.87

Purpose of Disbursement  
Database Support

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Katherine Buchanan

Transaction ID: D218714  
Date of Disbursement

Mailing Address 20 W Maple St

09 / 08 / 2010

City Alexandria State VA Zip Code 22301-2604

Amount of Each Disbursement this Period

1932.08

Purpose of Disbursement  
Accounting/Compliance Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
PingTone Communications

Transaction ID: D218890  
Date of Disbursement

Mailing Address 13921 Park Center Rd  
1st Floor

09 / 10 / 2010

City Herndon State VA Zip Code 20171-3236

Amount of Each Disbursement this Period

427.47

Purpose of Disbursement  
Telephone

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

3456.42

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)  
Forward Together PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PingTone Communications</p> <p>Mailing Address 13921 Park Center Rd 1st Floor</p> <p>City Herndon State VA Zip Code 20171-3236</p> <p>Purpose of Disbursement Internet Service</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><b>Transaction ID:</b> D2210475</p> <p>Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 66.30</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Wachovia, NA</p> <p>Mailing Address 301 N Washington St</p> <p>City Alexandria State VA Zip Code 22314-2501</p> <p>Purpose of Disbursement Credit Card Fees</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><b>Transaction ID:</b> D221042</p> <p>Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Spotswood Country Club</p> <p>Mailing Address 1980 Country Club Rd</p> <p>City Harrisonburg State VA Zip Code 22802-8840</p> <p>Purpose of Disbursement Catering/Events</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><b>Transaction ID:</b> D218946</p> <p>Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 1085.06</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1216.36</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

PAGE 27 / 37

<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)  
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) ANobleworld S3, Inc.	Transaction ID: D218710 Date of Disbursement 09 / 08 / 2010
	Mailing Address 201 N Union St Ste 300	Amount of Each Disbursement this Period 600.00
	City Alexandria State VA Zip Code 22314-2650	
	Purpose of Disbursement Computer 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) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Andrew M. Smith	Transaction ID: D219082 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2425 L St NW Apt 837	Amount of Each Disbursement this Period 1119.28
	City Washington State DC Zip Code 20037-2430	
	Purpose of Disbursement Salary	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) Mr. Andrew M. Smith	Transaction ID: D219278 Date of Disbursement 09 / 17 / 2010
	Mailing Address 2425 L St NW Apt 837	Amount of Each Disbursement this Period 330.20
	City Washington State DC Zip Code 20037-2430	
	Purpose of Disbursement Mileage/Telephone Reimbursement	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	2049.48
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 37

<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)  
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Mr. Andrew M. Smith	Transaction ID: D220353 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2425 L St NW Apt 837	Amount of Each Disbursement this Period 1119.28
	City Washington State DC Zip Code 20037-2430	
	Purpose of Disbursement Salary 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) Intuit	Transaction ID: D221044 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO Box 513340	Amount of Each Disbursement this Period 95.53
	City Los Angeles State CA Zip Code 90051-3340	
	Purpose of Disbursement Office Supplies 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) Perkins Coie, LLP	Transaction ID: D218475 Date of Disbursement 09 / 08 / 2010
	Mailing Address 1201 3rd Ave 40th Floor	Amount of Each Disbursement this Period 396.00
	City Seattle State WA Zip Code 98101-3099	
	Purpose of Disbursement Legal Services 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1610.81
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 37

<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)  
Forward Together PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Republic Parking System</p> <p>Mailing Address 108 N Fairfax St</p> <p>City Alexandria State VA Zip Code 22314-3224</p> <p>Purpose of Disbursement Parking</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D220262</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="108.75"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Campaign Finance Consultants</p> <p>Mailing Address 10 G St NE Ste 470</p> <p>City Washington State DC Zip Code 20002-8038</p> <p>Purpose of Disbursement Fundraising Consulting Services</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D218713</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3117.27"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 1270</p> <p>City Newark State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement Credit Card Payment</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D219781</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1709.02"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
Forward Together PAC

**A.**

Full Name (Last, First, Middle Initial)  
Public Storage

Mailing Address 370 Holland Ln

City Alexandria State VA Zip Code 22314-3418

Purpose of Disbursement  
Storage Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D219782  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**B.**

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

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D219787  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Wired For Change

Mailing Address 1700 Connecticut Ave NW

City Washington State DC Zip Code 20009-1134

Purpose of Disbursement  
Website Support

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D219784  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 37

<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)  
Forward Together PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Cranberry's Grocery Mailing Address 7 S New St City Staunton State VA Zip Code 24401-4309 Purpose of Disbursement Catering/Events 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: D219786 Date of Disbursement MM / DD / YYYY 09 / 25 / 2010
	Amount of Each Disbursement this Period 290.37 [MEMO ITEM]
<b>B.</b> Full Name (Last, First, Middle Initial) Staples Mailing Address 3301 Jefferson Davis Hwy City Alexandria State VA Zip Code 22305-3044 Purpose of Disbursement Office 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) ▼	Transaction ID: D219783 Date of Disbursement MM / DD / YYYY 09 / 25 / 2010
	Amount of Each Disbursement this Period 141.73 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	15498.06

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 37

<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)  
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Democratic Party of Virginia	Transaction ID: D218487 Date of Disbursement 09 / 03 / 2010
	Mailing Address 1710 E Franklin St FI 2	Amount of Each Disbursement this Period 5000.00
	City Richmond State VA Zip Code 23223-7025	
	Purpose of Disbursement Contribution 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) Blumenthal For Senate	Transaction ID: D220938 Date of Disbursement 09 / 30 / 2010
	Mailing Address 330 Main St FI 3	Amount of Each Disbursement this Period 2500.00
	City Hartford State CT Zip Code 06106-1851	
	Purpose of Disbursement Contribution Candidate Name Richard Blumenthal	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chris Coons for Delaware	Transaction ID: D220937 Date of Disbursement 09 / 30 / 2010
	Mailing Address PO Box 9900	Amount of Each Disbursement this Period 2500.00
	City Newark State DE Zip Code 19714-5000	
	Purpose of Disbursement Contribution Candidate Name Christopher A Coons	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gillibrand for Senate</p> <p>Mailing Address 313 C St NE</p> <p>City Washington State DC Zip Code 20002-5709</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Kirsten E Gillibrand</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D220947 <b>Date of Disbursement</b> 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Raj Goyle For Congress</p> <p>Mailing Address PO Box 780971</p> <p>City Wichita State KS Zip Code 67278-0971</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Raj Goyle</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D220942 <b>Date of Disbursement</b> 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Hodes for Senate</p> <p>Mailing Address 26 S Main St # 253</p> <p>City Concord State NH Zip Code 03301-4809</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Paul W. Hodes</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D220944 <b>Date of Disbursement</b> 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	11000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 37

<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)  
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Alexi for Illinois	Transaction ID: D219264 Date of Disbursement 09 / 15 / 2010
	Mailing Address PO Box 494	Amount of Each Disbursement this Period 5000.00
	City Chicago State IL Zip Code 60690-0494	
	Purpose of Disbursement Contribution Candidate Name Alexi Giannoulis Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 00	Category/Type
B.	Full Name (Last, First, Middle Initial) Carnahan in Congress	Transaction ID: D220941 Date of Disbursement 09 / 30 / 2010
	Mailing Address 7370 Manchester Rd Ste 20	Amount of Each Disbursement this Period 5000.00
	City Saint Louis State MO Zip Code 63143-3105	
	Purpose of Disbursement Contribution Candidate Name Russ Carnahan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 03	Category/Type
C.	Full Name (Last, First, Middle Initial) Scott McAdams for US Senate	Transaction ID: D219275 Date of Disbursement 09 / 15 / 2010
	Mailing Address PO Box 336	Amount of Each Disbursement this Period 5000.00
	City Sitka State AK Zip Code 99835-0336	
	Purpose of Disbursement Contribution Candidate Name Scott McAdams Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AK District: 00	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Colorado Democratic Party <hr/> Mailing Address 1100 Bannock St <hr/> City Denver State CO Zip Code 80204-3629 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input 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: D220936 Date of Disbursement 09 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Terri Sewell For Congress <hr/> Mailing Address PO Box 1964 <hr/> City Birmingham State AL Zip Code 35201-1964 <hr/> Purpose of Disbursement Contribution Candidate Name Terri Sewell <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220940 Date of Disbursement 09 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 5000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Kendrick Meek For Florida <hr/> Mailing Address 111 NW 183rd St Ste 325 <hr/> City Miami State FL Zip Code 33169-4538 <hr/> Purpose of Disbursement Contribution Candidate Name Kendrick Meek <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220943 Date of Disbursement 09 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 5000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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PAGE 36 / 37

<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)  
Forward Together PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Feingold Senate Committee <hr/> Mailing Address PO Box 620062 <hr/> City Middleton State WI Zip Code 53562-0062 <hr/> Purpose of Disbursement Contribution Candidate Name Russell Feingold <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220935 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Harry Teague For Congress <hr/> Mailing Address PO Box 5153 <hr/> City Hobbs State NM Zip Code 88241-5153 <hr/> Purpose of Disbursement Contribution Candidate Name Harry Teague <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220946 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Boucher For Congress Committee <hr/> Mailing Address PO Box 2000 <hr/> City Abingdon State VA Zip Code 24212-2000 <hr/> Purpose of Disbursement Contribution Candidate Name Fredrick C Boucher <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220264 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	63500.00

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

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FOR LINE NUMBER:  
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PAGE 37 / 37

<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)  
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)  
Fairfax County Democratic Committee

Mailing Address 2815 Hartland Rd  
Ste 110

City Falls Church State VA Zip Code 22043-3548

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D219266

Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)  
Friends of Martin O'Malley

Mailing Address 2400 Boston St  
Ste 203

City Baltimore State MD Zip Code 21224-4785

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D220934

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

4000.00

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

4250.00

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

4250.00