

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:
- | | | | |
|---|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input checked="" type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 03 01 2010 through 03 31 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 04 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	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

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	811153.93									
(c) Total Receipts (from Line 19)	23438.18	58180.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	834592.11	947944.11								
7. Total Disbursements (from Line 31)	64881.41	178233.41								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	769710.70	769710.70								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Forward Together PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

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)	20500.00	49000.00
(ii) Unitemized	375.00	475.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	20875.00	49475.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	2500.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	23375.00	55475.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	63.18	205.74
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))	23438.18	58180.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	23438.18	58180.74

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	25881.41	114233.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	25881.41	114233.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38500.00	48500.00
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	7500.00
(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	10000.00
29. Other Disbursements.....	500.00	5500.00
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))..	64881.41	178233.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64881.41	178233.41

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	23375.00	55475.00
34. Total Contribution Refunds (from Line 28(d))	0.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23375.00	45475.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	25881.41	114233.41
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	25881.41	114233.41

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 25
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)
Elon R. Musk

Mailing Address 1 Rocket Rd

City State Zip Code
Hawthorne CA 90250-6844

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

Name of Employer Occupation
SpaceX Co-Founder

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2010

Transaction ID: C2618591

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
John A. Powell

Mailing Address 2705 Buchanan St

City State Zip Code
San Francisco CA 94123-4806

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

Name of Employer Occupation
Integral Capital Partners Investment Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2010

Transaction ID: C3060332

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Andrew J. Reinhardt

Mailing Address 1809 Staples Mill Rd Suite 300

City State Zip Code
Richmond VA 23230-3515

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2010

Transaction ID: C2622786

Amount of Each Receipt this Period
500.00

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

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 7 / 25
	(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) D.J. Rogers		Date of Receipt MM / DD / YYYY 03 / 29 / 2010
Mailing Address 3153 Adam Keeling Rd		Transaction ID: C3058469
City Virginia Beach	State VA	Zip Code 23454-1003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Associated Distributors	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.

Full Name (Last, First, Middle Initial) Rosalind Anne Walrath		Date of Receipt MM / DD / YYYY 03 / 19 / 2010
Mailing Address 277 W End Ave		Transaction ID: C2623079
City New York	State NY	Zip Code 10023-2604
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer N/A	Occupation Retired	
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)	10000.00
TOTAL This Period (last page this line number only)	20500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 25
	(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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Ernst & Young Political Action Committee		Date of Receipt
	Mailing Address 1225 Connecticut Ave NW		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20036-2616
	FEC ID number of contributing federal political committee.		Transaction ID: C2618592
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2500.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 25	
	(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

A.	Full Name (Last, First, Middle Initial) Wachovia, NA		Date of Receipt	
	Mailing Address 301 N Washington St		M M / D D / Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: C3063145
	Alexandria	VA	22314-2501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	63.18
	Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	* Interest	
		205.74		

SUBTOTAL of Receipts This Page (optional)	▶	63.18
TOTAL This Period (last page this line number only)	▶	63.18

**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 10 / 25

<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)
CareFirst BlueCross BlueShield

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Insurance

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: D198206
Date of Disbursement

03 / 08 / 2010

Amount of Each Disbursement this Period

359.00

B.

Full Name (Last, First, Middle Initial)
LexisNexis

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Internet Research Services

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: D196182
Date of Disbursement

03 / 09 / 2010

Amount of Each Disbursement this Period

129.75

C.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 5800 Windward Pkwy

City Alpharetta State GA Zip Code 30005-8802

Purpose of Disbursement
Payroll Service Charge

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: D196424
Date of Disbursement

03 / 12 / 2010

Amount of Each Disbursement this Period

7.00

SUBTOTAL of Disbursements This Page (optional) ▶

495.75

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)

PAGE 11 / 25

<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: D196147 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Charge Candidate Name	<input type="text" value="78.93"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	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: D196148 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="text" value="413.42"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	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: D196576 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Charge Candidate Name	<input type="text" value="78.93"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="571.28"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 25

<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: D196577 Date of Disbursement																			
	Mailing Address 5800 Windward Pkwy	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	1	0												
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll Taxes	<table border="1"><tr><td>399.88</td></tr></table>	399.88																		
399.88																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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:																				

B.	Full Name (Last, First, Middle Initial) Columbia Capital, LLC	Transaction ID: D195244 Date of Disbursement																			
	Mailing Address 201 N Union St STE 300	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	0												
	City Alexandria State VA Zip Code 22314-2650	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Rent	<table border="1"><tr><td>643.36</td></tr></table>	643.36																		
643.36																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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:																				

C.	Full Name (Last, First, Middle Initial) ActBlue	Transaction ID: D196510 Date of Disbursement																			
	Mailing Address PO Box 382110	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	1	0												
	City Cambridge State MA Zip Code 02238-2110	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Service Fee	<table border="1"><tr><td>19.75</td></tr></table>	19.75																		
19.75																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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)	<table border="1"><tr><td>1062.99</td></tr></table>	1062.99
1062.99		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 25

<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: D196969 Date of Disbursement 03 / 29 / 2010
	Mailing Address PO Box 382110	Amount of Each Disbursement this Period 12.88
	City Cambridge State MA Zip Code 02238-2110	
	Purpose of Disbursement Service Fee Candidate Name	001 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: D197294 Date of Disbursement 03 / 31 / 2010
	Mailing Address PO Box 382110	Amount of Each Disbursement this Period 0.99
	City Cambridge State MA Zip Code 02238-2110	
	Purpose of Disbursement Service Fee Candidate Name	001 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) Verizon Conferencing	Transaction ID: D195985 Date of Disbursement 03 / 09 / 2010
	Mailing Address PO Box 70129	Amount of Each Disbursement this Period 2467.11
	City Chicago State IL Zip Code 60673-0129	
	Purpose of Disbursement Telephone Candidate Name	001 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)	2480.98
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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D197276 Date of Disbursement 03 / 31 / 2010
	Mailing Address 1225 I St NW Ste 1225	Amount of Each Disbursement this Period 1096.87
	City Washington State DC Zip Code 20005-5918	
	Purpose of Disbursement Database Support Candidate Name	001 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) Katherine Buchanan	Transaction ID: D195983 Date of Disbursement 03 / 31 / 2010
	Mailing Address 102 Lake Cook Dr	Amount of Each Disbursement this Period 1875.00
	City Alexandria State VA Zip Code 22304-6451	
	Purpose of Disbursement Accounting/Compliance Services Candidate Name	001 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) Funding Solutions, LLC	Transaction ID: D196308 Date of Disbursement 03 / 15 / 2010
	Mailing Address 18 Ensigne Spence	Amount of Each Disbursement this Period 4846.06
	City Williamsburg State VA Zip Code 23185	
	Purpose of Disbursement Fundraising Consulting Services Candidate Name	003 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)	7817.93
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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) PingTone Communications	Transaction ID: D196149 Date of Disbursement
	Mailing Address 13921 Park Center Rd 1st Floor	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Herndon State VA Zip Code 20171-3236	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Candidate Name	<input type="text" value="214.66"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) PingTone Communications	Transaction ID: D195243 Date of Disbursement
	Mailing Address 13921 Park Center Rd 1st Floor	<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Herndon State VA Zip Code 20171-3236	Amount of Each Disbursement this Period
	Purpose of Disbursement Internet Service Telephone Candidate Name	<input type="text" value="66.30"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Wachovia, NA	Transaction ID: D197525 Date of Disbursement
	Mailing Address 301 N Washington St	<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314-2501	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Fees Telephone Candidate Name	<input type="text" value="215.60"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="496.56"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input 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: D195989 Date of Disbursement 03 / 09 / 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 Candidate Name	001 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) Mr. Andrew M. Smith	Transaction ID: D196146 Date of Disbursement 03 / 15 / 2010
	Mailing Address 1410 N Scott St Apt 949	Amount of Each Disbursement this Period 1119.57
	City Arlington State VA Zip Code 22209-2982	
	Purpose of Disbursement Salary Candidate Name	001 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) Mr. Andrew M. Smith	Transaction ID: D196307 Date of Disbursement 03 / 15 / 2010
	Mailing Address 1410 N Scott St Apt 949	Amount of Each Disbursement this Period 176.12
	City Arlington State VA Zip Code 22209-2982	
	Purpose of Disbursement Office Supplies Reimbursement Candidate Name	001 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)	1895.69
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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Mr. Andrew M. Smith	Transaction ID: D196578 Date of Disbursement 03 / 31 / 2010
	Mailing Address 1410 N Scott St Apt 949	Amount of Each Disbursement this Period 1119.57
	City Arlington State VA Zip Code 22209-2982	
	Purpose of Disbursement Salary Candidate Name	001 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) Perkins Coie, LLP	Transaction ID: D196999 Date of Disbursement 03 / 31 / 2010
	Mailing Address 1201 3rd Ave 40th Floor	Amount of Each Disbursement this Period 216.00
	City Seattle State WA Zip Code 98101-3099	
	Purpose of Disbursement Legal Services Candidate Name	001 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: D195986 Date of Disbursement 03 / 09 / 2010
	Mailing Address 1201 3rd Ave 40th Floor	Amount of Each Disbursement this Period 432.00
	City Seattle State WA Zip Code 98101-3099	
	Purpose of Disbursement Legal Services Candidate Name	001 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)	1767.57
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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Republic Parking System	Transaction ID: D196509 Date of Disbursement																			
	Mailing Address 108 N Fairfax St	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	1	0												
	City Alexandria State VA Zip Code 22314-3224	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Parking Candidate Name	<table border="1"><tr><td>108.75</td></tr></table>	108.75																		
108.75																					
	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) ▼																			
		001 Category/ Type																			

B.	Full Name (Last, First, Middle Initial) Campaign Finance Consultants	Transaction ID: D196151 Date of Disbursement																			
	Mailing Address 10 G St NE Ste 470	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	1	0												
	City Washington State DC Zip Code 20002-8038	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fundraising Consulting Services Candidate Name	<table border="1"><tr><td>3155.86</td></tr></table>	3155.86																		
3155.86																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		003 Category/ Type																			

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D197133 Date of Disbursement																			
	Mailing Address PO Box 1270	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	1	0												
	City Newark State NJ Zip Code 07101-1270	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Payment Candidate Name	<table border="1"><tr><td>4983.21</td></tr></table>	4983.21																		
4983.21																					
	Office Sought: <input type="checkbox"/> House <input 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)	<table border="1"><tr><td>8247.82</td></tr></table>	8247.82
8247.82		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) The Jefferson Hotel	Transaction ID: D197145 Date of Disbursement
	Mailing Address 101 W Franklin St	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Richmond State VA Zip Code 23220-5028	Amount of Each Disbursement this Period
	Purpose of Disbursement Catering/Events Candidate Name	<input type="text" value="2076.03"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: <input type="text" value="003"/>	

B.	Full Name (Last, First, Middle Initial) Public Storage	Transaction ID: D197141 Date of Disbursement
	Mailing Address 370 Holland Ln	<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314-3418	Amount of Each Disbursement this Period
	Purpose of Disbursement Storage Fee Candidate Name	<input type="text" value="171.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: <input type="text" value="001"/>	

C.	Full Name (Last, First, Middle Initial) Helen Olivia	Transaction ID: D197143 Date of Disbursement
	Mailing Address 222 N Lee St	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314-2666	Amount of Each Disbursement this Period
	Purpose of Disbursement Event Supplies Candidate Name	<input type="text" value="970.50"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Category/Type: <input type="text" value="003"/>	

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 25

<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) Wired For Change	Transaction ID: D197137 Date of Disbursement
	Mailing Address 1700 Connecticut Ave NW	<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20009-1134	Amount of Each Disbursement this Period
	Purpose of Disbursement Website Support	<input type="text" value="1625.00"/>
	Candidate Name	<input type="text" value="001"/> 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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Chase Visa	Transaction ID: D197272 Date of Disbursement
	Mailing Address PO Box 15153	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Wilmington State DE Zip Code 19886-5153	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment	<input type="text" value="996.86"/>
	Candidate Name	<input type="text" value="003"/> 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) Total Wine And More	Transaction ID: D197273 Date of Disbursement
	Mailing Address 1451 Chain Bridge Rd	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Mc Lean State VA Zip Code 22101-3722	Amount of Each Disbursement this Period
	Purpose of Disbursement Catering/Events	<input type="text" value="730.32"/>
	Candidate Name	<input type="text" value="003"/> 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) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="996.86"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 25

<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)
Virginia ABC Store

Mailing Address 1446 Chain Bridge Rd

City State Zip Code
Mc Lean VA 22101-3706

Purpose of Disbursement
Catering/Events

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D197274

Date of Disbursement

03 / 09 / 2010

Amount of Each Disbursement this Period

266.54

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

25833.43

**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

A.	Full Name (Last, First, Middle Initial) Cunningham For US Senate	Transaction ID: D196973 Date of Disbursement
	Mailing Address PO Box 2021	<input type="text" value="03"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Raleigh State NC Zip Code 27602-2021	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Cal Cunningham	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Democratic Party of Virginia	Transaction ID: D196355 Date of Disbursement
	Mailing Address 1710 E Franklin St FI 2	<input type="text" value="03"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Richmond State VA Zip Code 23223-7025	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name Democratic Party of Virginia	<input type="text" value="011"/> 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) Ellsworth For Indiana	Transaction ID: D196974 Date of Disbursement
	Mailing Address PO Box 62	<input type="text" value="03"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Evansville State IN Zip Code 47701-0062	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Brad Ellsworth	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Blumenthal For Senate	Transaction ID: D196970 Date of Disbursement 03 / 30 / 2010
	Mailing Address 330 Main St FI 3	Amount of Each Disbursement this Period 5000.00
	City Hartford State CT Zip Code 06106-1851	
	Purpose of Disbursement Contribution Candidate Name Richard Blumenthal	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chris Coons for Delaware	Transaction ID: D196971 Date of Disbursement 03 / 30 / 2010
	Mailing Address PO Box 9900	Amount of Each Disbursement this Period 5000.00
	City Newark State DE Zip Code 19714-5000	
	Purpose of Disbursement Contribution Candidate Name Christopher A Coons	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gillibrand for Senate	Transaction ID: D196975 Date of Disbursement 03 / 30 / 2010
	Mailing Address 313 C St NE	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20002-5709	
	Purpose of Disbursement Contribution Candidate Name Kirsten E Gillibrand	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	15000.00
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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Raj Goyle For Congress	Transaction ID: D196976 Date of Disbursement 03 / 30 / 2010
	Mailing Address PO Box 780971	Amount of Each Disbursement this Period 1000.00
	City Wichita State KS Zip Code 67278-0971	
	Purpose of Disbursement Contribution Candidate Name Raj Goyle Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Robin Carnahan for Senate	Transaction ID: D196977 Date of Disbursement 03 / 30 / 2010
	Mailing Address PO Box 50378	Amount of Each Disbursement this Period 5000.00
	City Saint Louis State MO Zip Code 63105-5378	
	Purpose of Disbursement Contribution Candidate Name Robin Carnahan Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Citizens for Arlen Specter	Transaction ID: D196972 Date of Disbursement 03 / 30 / 2010
	Mailing Address 236 Massachusetts Ave NE Suite 602	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20013-0103	
	Purpose of Disbursement Contribution Candidate Name Arlen Specter Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	38500.00

**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)

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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 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)
Virginia Democratic Womens Caucus

Mailing Address 1710 E Franklin St

City Richmond State VA Zip Code 23223-7025

Purpose of Disbursement
Non Federal Contribution

Candidate Name
Virginia Democratic Womens Caucus

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: D196416

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	1	0

Amount of Each Disbursement this Period

500.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00