

# 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

Virginia Leadership PAC

ADDRESS (number and street) 800 South St. Asaph St., #301

Check if different than previously reported. (ACC)

Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00378356

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 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 07 01 2007 through 12 31 2007

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

Type or Print Name of Treasurer Hannah Margetich

Signature of Treasurer Electronically Filed by Hannah Margetich Date 01 22 2008

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

|                 |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Virginia Leadership PAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |          |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 7 |  | 35315.26 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |          |
| 2   | 0                       | 0                                 | 7 |   |   |   |   |   |  |          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 132281.66               |                                   |   |   |   |   |   |   |  |          |
| (c) Total Receipts (from Line 19) .....   | 7500.00                 | 195150.00                         |   |   |   |   |   |   |  |          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 139781.66               | 230465.26                         |   |   |   |   |   |   |  |          |
| 7. Total Disbursements (from Line 31) .....   | 82200.00                | 172883.60                         |   |   |   |   |   |   |  |          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 57581.66                | 57581.66                          |   |   |   |   |   |   |  |          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |          |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |          |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Virginia Leadership PAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 2500.00                       | 180150.00                         |
| (i) Itemized (use Schedule A) .....  | 0.00                          | 0.00                              |
| (ii) Unitemized .....  | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 2500.00                       | 180150.00                         |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 5000.00                       | 15000.00                          |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 7500.00                       | 195150.00                         |
| 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                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 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)) .....                          | 7500.00                       | 195150.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 7500.00                       | 195150.00                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>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.....  | 7200.00                               | 26433.60                                  |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                          | 7200.00                               | 26433.60                                  |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                                  | 0.00                                      |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 40500.00                              | 50500.00                                  |
| 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                                  | 400.00                                    |
| (b) Political Party Committees .....   | 0.00                                  | 0.00                                      |
| (c) Other Political Committees (such as PACs) .....  | 1000.00                               | 1000.00                                   |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 1000.00                               | 1400.00                                   |
| 29. Other Disbursements.....   | 33500.00                              | 94550.00                                  |
| 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))..       | 82200.00                              | 172883.60                                 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 82200.00                              | 172883.60                                 |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3 .....         | 7500.00                       | 195150.00                         |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 1000.00                       | 1400.00                           |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 6500.00                       | 193750.00                         |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 7200.00                       | 26433.60                          |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) .....             | 7200.00                       | 26433.60                          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|   |                              |                              |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             |                              | PAGE 6 / 20                 |                             |
|   | (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"/> 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)  
Virginia Leadership PAC

|   |  |                                     |                                       |                             |
|---|--|-------------------------------------|---------------------------------------|-----------------------------|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Bernard L. Gauf |                                     | Date of Receipt                       |                             |
|   | Mailing Address 2542 Babcock Road                          |                                     | M M / D D / Y Y Y Y<br>07 / 17 / 2007 |                             |
|   | City   | State                               | Zip Code                              | <b>Transaction ID: C191</b> |
|   | Vienna   | VA                                  | 22181                                 |                             |
|   | FEC ID number of contributing federal political committee. |                                     | Amount of Each Receipt this Period    |                             |
|   | C  |                                     | 2500.00                               |                             |
| Name of Employer<br>Innovative Defense Technologies   |  | Occupation<br>President             |                                       |                             |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>2500.00 |                                       |                             |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 2500.00 |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|   |                              |   |                             |                             |
|---|------------------------------|---|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             |   | PAGE 7 / 20                 |                             |
|   | (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"/> 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)  
Virginia Leadership PAC

|   |  |  |   |
|---|--|--|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP) |  | Date of Receipt   |
|   | Mailing Address 2941 Fairview Park Dr.<br>Suite 100  |  | <input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2007"/> |
|   | City   | State                                    | Zip Code  |
|   | Falls Church   | VA                                       | 22042   |
|   | FEC ID number of contributing federal political committee.   | <input type="text" value="C C00078451"/> |   |
| Name of Employer  | Occupation   |  | Transaction ID: C194  |
| Receipt For:  | Aggregate Year-to-Date ▼   |  | Amount of Each Receipt this Period  |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="5000.00"/>   |  | <input type="text" value="5000.00"/>  |
| <input type="checkbox"/> Other (specify) ▼                        |  |  |   |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="5000.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text" value="5000.00"/> |

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)  
Virginia Leadership PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Rosemarie Clauston  | Transaction ID: D302<br>Date of Disbursement<br>12 / 01 / 2007   |
|    | Mailing Address 122 Roberts Lane, Apt. 301   | Amount of Each Disbursement this Period<br>1000.00   |
|    | City Alexandria State VA Zip Code 22314  |  |
|    | Purpose of Disbursement Administrative consulting fee  |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Hannah Margetich  | Transaction ID: D299<br>Date of Disbursement<br>12 / 17 / 2007   |
|    | Mailing Address 800 S Saint Asaph St Apt 301   | Amount of Each Disbursement this Period<br>5000.00   |
|    | City Alexandria State VA Zip Code 22314-4361   |  |
|    | Purpose of Disbursement Fundraising consulting fee   |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Winpisinger & Associates, Inc.  | Transaction ID: D317<br>Date of Disbursement<br>07 / 11 / 2007   |
|    | Mailing Address 315 Inspiration Lane   | Amount of Each Disbursement this Period<br>400.00  |
|    | City Gaithersburg State MD Zip Code 20878  |  |
|    | Purpose of Disbursement Admin/Compliance   |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 6400.00 |
| <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 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)  
Virginia Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Winpisinger & Associates, Inc.

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement Admin/Compliance  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D326  
Date of Disbursement

09 / 06 / 2007

Amount of Each Disbursement this Period

400.00

**B.** Full Name (Last, First, Middle Initial)  
Winpisinger & Associates, Inc.

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement Admin/Compliance  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D316  
Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

400.00

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

800.00

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

7200.00

# 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)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)  
Virginia Leadership PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br><b>ALEXANDRIA DEMOCRATIC COMMITTEE</b>  | <b>Transaction ID: D296</b><br>Date of Disbursement<br>09 / 19 / 2007 |
|    | Mailing Address<br>618 N Washington St<br>Ground floor Suite 2   | Amount of Each Disbursement this Period<br>1500.00                    |
|    | City: Alexandria State: VA Zip Code: 22314   |   |
|    | Purpose of Disbursement: Contribution<br>Candidate Name: _____<br>Category/Type: _____   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2007<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>State: _____ District: _____ |   |

|    |   |   |
|----|---|---|
| B. | Full Name (Last, First, Middle Initial)<br><b>BOCCIERI FOR CONGRESS</b>   | <b>Transaction ID: D324</b><br>Date of Disbursement<br>07 / 31 / 2007 |
|    | Mailing Address<br>PO BOX 3016  | Amount of Each Disbursement this Period<br>500.00                     |
|    | City: ALLIANCE State: OH Zip Code: 44601  |   |
|    | Purpose of Disbursement: Contribution<br>Candidate Name: John A. Bocceri<br>Category/Type: _____  |   |
|    | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: OH District: 16 |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br><b>DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>  | <b>Transaction ID: D318</b><br>Date of Disbursement<br>07 / 17 / 2007 |
|    | Mailing Address<br>430 South Capitol Street SE<br>2nd Floor  | Amount of Each Disbursement this Period<br>15000.00                   |
|    | City: Washington State: DC Zip Code: 20003   |   |
|    | Purpose of Disbursement: Contribution<br>Candidate Name: _____<br>Category/Type: _____   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2007<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>State: _____ District: _____ |   |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>17000.00</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)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)  
Virginia Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
DEMOCRATIC NATIONAL COMMITTEE (WLF)

Transaction ID: D306

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 430 S. CAPITOL STREET S.E.

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Contribution/WLF

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: District: O

B.

Full Name (Last, First, Middle Initial)  
DRIEHAUS FOR CONGRESS

Transaction ID: D323

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 1018 BENZ AVENUE

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

City CINCINNATI State OH Zip Code 45238

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name  
Steven Leo Driehaus

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 01

C.

Full Name (Last, First, Middle Initial)  
EIGHTH DISTRICT DEMOCRATIC COMMITTEE

Transaction ID: D307

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 3757 MADISON LANE

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: District: O

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

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|---------|
| 7000.00 |
|---------|

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

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**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)  
Virginia Leadership PAC

|    |   |   |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial)<br><b>FORGIT FOR CONGRESS</b>   | <b>Transaction ID: D303</b>   |
|    | Mailing Address <b>PO BOX 6504</b>  | Date of Disbursement<br>12 / 03 / 2007  |
|    | City <b>WILLIAMSBURG</b> State <b>VA</b> Zip Code <b>23188</b>  | Amount of Each Disbursement this Period<br>5000.00  |
|    | Purpose of Disbursement<br>Contribution   | Category/<br>Type   |
|    | Candidate Name<br><b>Philip Forgit</b>  |   |
|    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2007<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>Special |
|    | State: <b>VA</b> District: <b>01</b>  |   |

|    |   |  |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial)<br><b>FRIENDS OF MARK WARNER</b>  | <b>Transaction ID: D300</b>  |
|    | Mailing Address <b>201 NORTH UNION SUITE 350</b>  | Date of Disbursement<br>12 / 10 / 2007   |
|    | City <b>ALEXANDRIA</b> State <b>VA</b> Zip Code <b>22314</b>  | Amount of Each Disbursement this Period<br>5000.00   |
|    | Purpose of Disbursement<br>Contribution   | Category/<br>Type  |
|    | Candidate Name<br><b>Mark Robert Warner</b>   |  |
|    | Office Sought: <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    | State: <b>VA</b> District: <b>00</b>  |  |

|    |   |  |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial)<br><b>JIM HIMES FOR CONGRESS</b>  | <b>Transaction ID: D325</b>  |
|    | Mailing Address <b>65 High Ridge Road Box 456<br/>BOX 456</b>   | Date of Disbursement<br>07 / 31 / 2007   |
|    | City <b>Stamford</b> State <b>CT</b> Zip Code <b>06905</b>  | Amount of Each Disbursement this Period<br>500.00  |
|    | Purpose of Disbursement<br>Contribution   | Category/<br>Type  |
|    | Candidate Name<br><b>jim Himes</b>  |  |
|    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    | State: <b>CT</b> District: <b>04</b>  |  |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>10500.00</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)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)  
Virginia Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
JUDY FEDER FOR CONGRESS

Transaction ID: D304

Date of Disbursement

Mailing Address 1514 HARDWOOD LANE

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 5 |   | 2 | 0 | 0 | 7 |

City State Zip Code  
MCLEAN VA 22101

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name  
Judy Feder

Office Sought:  House  
 Senate  
 President  
State: VA District: 10  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
MASON DISTRICT DEMOCRATIC COMMITTEE

Transaction ID: D319

Date of Disbursement

Mailing Address 3757 MADISON LANE

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 0 | 7 |

City State Zip Code  
FALLS CHURCH VA 22041

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:  
Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
PAUL HODES FOR CONGRESS

Transaction ID: D297

Date of Disbursement

Mailing Address 26 SOUTH MAIN STREET, #253

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 0 | 7 |

City State Zip Code  
Concord NH 03301

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name  
Paul Hodes

Office Sought:  House  
 Senate  
 President  
State: NH District: 02  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

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

|         |
|---------|
| 4000.00 |
|---------|

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

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**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 14 / 20

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)  
Virginia Leadership PAC

A. Full Name (Last, First, Middle Initial)  
ROBIN WEIRAUCH FOR CONGRESS

Mailing Address PO Box 301

City Napoleon State OH Zip Code 43545

Purpose of Disbursement  
Contribution

Candidate Name  
Robin Weirauch

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: OH District: 05

Special

Transaction ID: D301

Date of Disbursement

11 / 25 / 2007

Amount of Each Disbursement this Period

2000.00

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

2000.00

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

40500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 20

|                              |                              |                              |   |                             |                              |
|------------------------------|------------------------------|------------------------------|---|-----------------------------|------------------------------|
| <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 checked="" type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Virginia Leadership PAC

|    |   |  |  |  |
|----|---|--|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Saslaw for State Senate  |  | Transaction ID: D321                   |  |
|    | Mailing Address PO Box 1254   |  | Date of Disbursement<br>07 / 26 / 2007 |  |
|    | City<br>Springfield   | State<br>VA  | Zip Code<br>22151                      | Amount of Each Disbursement this Period<br>1000.00 |
|    | Purpose of Disbursement<br>Refund   |  | Category/<br>Type                      |  |
|    | Candidate Name  |  |  |  |
|    | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
|    | State:  | District:  |  |  |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 1000.00 |

# 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)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)  
Virginia Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Arlington Young Democratic Committee

Mailing Address PO Box 7132

City Arlington State VA Zip Code 22207-0132

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: D322

Date of Disbursement

07 / 27 / 2007

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Barker for Senate

Mailing Address 7606 Tiffany Court

City Clifton State VA Zip Code 20124

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: D320

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Barker for Senate

Mailing Address 7606 Tiffany Court

City Clifton State VA Zip Code 20124

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: D310

Date of Disbursement

10 / 25 / 2007

Amount of Each Disbursement this Period

1500.00

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input 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)  
Virginia Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
Colgan for State Senate

Transaction ID: D313

Date of Disbursement

Mailing Address 9100 Church Street

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 0 | 7 |

City Manassas State VA Zip Code 20110

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Purpose of Disbursement  
Non-Federal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
David Englin for Delegate

Transaction ID: D328

Date of Disbursement

Mailing Address PO Box 406

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

City Richmond State VA Zip Code 23218

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Non-Federal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Friends of Karen Schultz

Transaction ID: D312

Date of Disbursement

Mailing Address PO Box 3731

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 0 | 7 |

City Winchester State VA Zip Code 22604

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Purpose of Disbursement  
Non-Federal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

|         |
|---------|
| 5500.00 |
|---------|

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

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|--|

**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 18 / 20

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)  
Virginia Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
Fund for a Better Virginia

Transaction ID: D327

Date of Disbursement

Mailing Address PO Box 7118

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 7 |   | 2 | 0 | 0 | 7 |

City Arlington State VA Zip Code 22207

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Non-Federal Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Janet Oleszek for State Senate

Transaction ID: D314

Date of Disbursement

Mailing Address PO Box 10845

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 0 | 7 |

City Burke State VA Zip Code 22009

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Non-Federal Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
John Miller for Senate

Transaction ID: D309

Date of Disbursement

Mailing Address PO Box 6113

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 0 | 7 |

City Newport News State VA Zip Code 23606

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Non-Federal Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

|         |
|---------|
| 3000.00 |
|---------|

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

|  |
|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 20

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)  
Virginia Leadership PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Morrogh for Commonwealth's Attorney   | Transaction ID: D311<br>Date of Disbursement  |
|    | Mailing Address PO Box 0828  | <input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="07"/> |
|    | City State Zip Code<br>Fairfax VA 22038-0828   | Amount of Each Disbursement this Period   |
|    | Purpose of Disbursement<br>Non-Federal Contribution  | <input type="text" value="1000.00"/>  |
|    | Candidate Name   | Category/<br>Type   |
|    | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General   |
|    | State: District:   | <input type="checkbox"/> Other (specify) ▼  |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Moving Virginia Forward   | Transaction ID: D305<br>Date of Disbursement  |
|    | Mailing Address 1021 East Cary Street, Suite 2150  | <input type="text" value="09"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="07"/> |
|    | City State Zip Code<br>Richmond VA 23219   | Amount of Each Disbursement this Period   |
|    | Purpose of Disbursement<br>Non-Federal Contribution  | <input type="text" value="10000.00"/>   |
|    | Candidate Name   | Category/<br>Type   |
|    | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General   |
|    | State: District:   | <input checked="" type="checkbox"/> Other (specify) ▼   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Saslaw for State Senate   | Transaction ID: D308<br>Date of Disbursement  |
|    | Mailing Address PO Box 1254  | <input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="07"/> |
|    | City State Zip Code<br>Springfield VA 22151  | Amount of Each Disbursement this Period   |
|    | Purpose of Disbursement<br>Non-Federal Contribution  | <input type="text" value="10000.00"/>   |
|    | Candidate Name   | Category/<br>Type   |
|    | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General   |
|    | State: District:   | <input type="checkbox"/> Other (specify) ▼  |

|  |                                       |
|--|---------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="21000.00"/> |
| <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 20 / 20

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)  
Virginia Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
Stop Child Abuse Now

Transaction ID: D315

Date of Disbursement

Mailing Address 1705 Fern Street, 2nd Floor

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 3 | 0 |   | 2 | 0 | 0 | 7 |

City State Zip Code  
Alexandria VA 22302

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Donation

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

|         |
|---------|
| 1000.00 |
|---------|

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

|          |
|----------|
| 33500.00 |
|----------|