

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 DC DEMOCRATIC STATE COMMITTEE

ADDRESS (number and street) 3539 T Street, NW Washington DC 20007 Check if different than previously reported. (ACC) X

2. FEC IDENTIFICATION NUMBER C00295964 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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

5. Covering Period 01 01 2009 through 12 31 2009

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 Daniel Wedderburn Signature of Treasurer Electronically Filed by Daniel Wedderburn Date 03 18 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 FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
DC DEMOCRATIC STATE COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand 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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		19919.45
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	19919.45									
(c) Total Receipts (from Line 19)	39220.47	39220.47								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	59139.92	59139.92								
7. Total Disbursements (from Line 31)	39183.61	39183.61								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19956.31	19956.31								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
DC DEMOCRATIC STATE COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	39160.00	39160.00
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.)	60.47	60.47
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))	39220.47	39220.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	39220.47	39220.47

DETAILED SUMMARY PAGE

of Disbursements

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.....	24160.00	24160.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	24160.00	24160.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	15023.61	15023.61
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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
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))..	39183.61	39183.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39183.61	39183.61

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24160.00	24160.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	24160.00	24160.00

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

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
DC DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 6 / 2 0 0 9

Mailing Address

City State Zip Code
WASHINGTON DC

Transaction ID: SA12.4122

FEC ID number of contributing federal political committee. **C** C00010603

Amount of Each Receipt this Period
1950.00

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

In-kind - Online Voter File Access

B. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 5 / 2 0 0 9

Mailing Address

City State Zip Code
WASHINGTON DC

Transaction ID: SA12.4124

FEC ID number of contributing federal political committee. **C** C00010603

Amount of Each Receipt this Period
1950.00

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3900.00

In-kind - Online Voter File Access

C. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Mailing Address

City State Zip Code
WASHINGTON DC

Transaction ID: SA12.4126

FEC ID number of contributing federal political committee. **C** C00010603

Amount of Each Receipt this Period
2026.00

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5926.00

In-kind - Online Voter File Access

SUBTOTAL of Receipts This Page (optional) ► **5926.00**

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 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DC DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Date of Receipt: / /
Transaction ID: SA12.4129

Mailing Address

City: WASHINGTON State: DC Zip Code

FEC ID number of contributing federal political committee:

Amount of Each Receipt this Period:

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date:

In-kind - Online Voter File Access

B. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Date of Receipt: / /
Transaction ID: SA12.4131

Mailing Address

City: WASHINGTON State: DC Zip Code

FEC ID number of contributing federal political committee:

Amount of Each Receipt this Period:

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date:

In-kind - Online Voter File Access

C. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Date of Receipt: / /
Transaction ID: SA12.4133

Mailing Address

City: WASHINGTON State: DC Zip Code

FEC ID number of contributing federal political committee:

Amount of Each Receipt this Period:

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date:

In-kind - Online Voter File Access

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
DC DEMOCRATIC STATE COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14030.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2009

Transaction ID: SA12.4135

Amount of Each Receipt this Period

2026.00

In-kind - Online Voter File Access

B.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16056.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2009

Transaction ID: SA12.4137

Amount of Each Receipt this Period

2026.00

In-kind - Online Voter File Access

C.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
18082.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 11 / 2009

Transaction ID: SA12.4139

Amount of Each Receipt this Period

2026.00

In-kind - Online Voter File Access

SUBTOTAL of Receipts This Page (optional) ▶

6078.00

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 9 / 17

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
DC DEMOCRATIC STATE COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20108.00

Date of Receipt

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

Transaction ID: SA12.4141

Amount of Each Receipt this Period

2026.00

In-kind - Online Voter File Access

B.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25108.00

Date of Receipt

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

Transaction ID: SA12.4109

Amount of Each Receipt this Period

5000.00

STATE PARTY SUPPORT

C.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27134.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 9

Transaction ID: SA12.4143

Amount of Each Receipt this Period

2026.00

In-kind - Online Voter File Access

SUBTOTAL of Receipts This Page (optional) ►

9052.00

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 10 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DC DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
32134.00

Date of Receipt

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

Transaction ID: SA12.4112

Amount of Each Receipt this Period
5000.00

STATE PARTY SUPPORT

B. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
34160.00

Date of Receipt

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

Transaction ID: SA12.4145

Amount of Each Receipt this Period
2026.00

In-kind - Online Voter File Access

C. Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address

City State Zip Code
WASHINGTON DC

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39160.00

Date of Receipt

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

Transaction ID: SA12.4117

Amount of Each Receipt this Period
5000.00

STATE PARTY SUPPORT

SUBTOTAL of Receipts This Page (optional) ► **12026.00**

TOTAL This Period (last page this line number only) ► **39160.00**

**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)
DC DEMOCRATIC STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE	Transaction ID: SB21B.4123
	Mailing Address	Date of Disbursement 01 / 06 / 2009
	City: WASHINGTON State: DC Zip Code	Amount of Each Disbursement this Period 1950.00
	Purpose of Disbursement: In-kind - Online Voter File Access Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE	Transaction ID: SB21B.4125
	Mailing Address	Date of Disbursement 02 / 05 / 2009
	City: WASHINGTON State: DC Zip Code	Amount of Each Disbursement this Period 1950.00
	Purpose of Disbursement: In-kind - Online Voter File Access Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE	Transaction ID: SB21B.4127
	Mailing Address	Date of Disbursement 03 / 06 / 2009
	City: WASHINGTON State: DC Zip Code	Amount of Each Disbursement this Period 2026.00
	Purpose of Disbursement: In-kind - Online Voter File Access Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	5926.00
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 12 / 17

<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)
DC DEMOCRATIC STATE COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE</p> <p>Mailing Address</p> <p>City: WASHINGTON State: DC Zip Code</p> <p>Purpose of Disbursement In-kind - Online Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4130 Date of Disbursement: 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 2026.00</p>
<p>B. Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE</p> <p>Mailing Address</p> <p>City: WASHINGTON State: DC Zip Code</p> <p>Purpose of Disbursement In-kind - Online Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4132 Date of Disbursement: 05 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 2026.00</p>
<p>C. Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE</p> <p>Mailing Address</p> <p>City: WASHINGTON State: DC Zip Code</p> <p>Purpose of Disbursement In-kind - Online Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4134 Date of Disbursement: 06 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 2026.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6078.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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)
DC DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE Mailing Address City: WASHINGTON State: DC Zip Code Purpose of Disbursement: In-kind - Online Voter File Access Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4136 Date of Disbursement: 07 / 07 / 2009
	Amount of Each Disbursement this Period: 2026.00

B. Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE Mailing Address City: WASHINGTON State: DC Zip Code Purpose of Disbursement: In-kind - Online Voter File Access Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4138 Date of Disbursement: 08 / 04 / 2009
	Amount of Each Disbursement this Period: 2026.00

C. Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE Mailing Address City: WASHINGTON State: DC Zip Code Purpose of Disbursement: In-kind - Online Voter File Access Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4140 Date of Disbursement: 09 / 11 / 2009
	Amount of Each Disbursement this Period: 2026.00

SUBTOTAL of Disbursements This Page (optional) ▶	6078.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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)
DC DEMOCRATIC STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE	Transaction ID: SB21B.4142
	Mailing Address	Date of Disbursement 10 / 02 / 2009
	City: WASHINGTON State: DC Zip Code	Amount of Each Disbursement this Period 2026.00
	Purpose of Disbursement: In-kind - Online Voter File Access 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) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE	Transaction ID: SB21B.4144
	Mailing Address	Date of Disbursement 11 / 04 / 2009
	City: WASHINGTON State: DC Zip Code	Amount of Each Disbursement this Period 2026.00
	Purpose of Disbursement: In-kind - Online Voter File Access 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) DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE	Transaction ID: SB21B.4146
	Mailing Address	Date of Disbursement 12 / 03 / 2009
	City: WASHINGTON State: DC Zip Code	Amount of Each Disbursement this Period 2026.00
	Purpose of Disbursement: In-kind - Online Voter File Access Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional)	6078.00
TOTAL This Period (last page this line number only)	24160.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DC DEMOCRATIC STATE COMMITTEE	FEC IDENTIFICATION NUMBER C C00295964
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
INDEPENDENCE FEDERAL SAVINGS BANK

Mailing Address
1301 Ninth St. NW

City	State	Zip Code
Washington	DC	20001

Purpose of Expenditure BANK FEE	Category/ Type	001
------------------------------------	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought	10.00
---	-------

Date

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

Amount

10.00

Transaction ID: SE.4098

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
INDEPENDENCE FEDERAL SAVINGS BANK

Mailing Address
1301 Ninth St. NW

City	State	Zip Code
Washington	DC	20001

Purpose of Expenditure BANK FEE	Category/ Type	001
------------------------------------	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought	20.00
---	-------

Date

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

Amount

10.00

Transaction ID: SE.4100

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

20.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures

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

Daniel Wedderburn
Signature

Date

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DC DEMOCRATIC STATE COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00295964
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
INDEPENDENCE FEDERAL SAVINGS BANK

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

Mailing Address
1301 Ninth St. NW

Amount
3.61

City State Zip Code
Washington DC 20001

Transaction ID: SE.4113
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
INTEREST

Category/
Type 001

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election
for Office Sought 10023.61

Full Name (Last, First, Middle, Initial) of Payee
Mr. DAVID MEADOWS

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

Mailing Address
305 K St. SE

Amount
5000.00

City State Zip Code
Washington DC 20003

Transaction ID: SE.4114
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
Consulting Fee

Category/
Type 001

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election
for Office Sought 5020.00

(a) SUBTOTAL of Itemized Independent Expenditures	5003.61
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

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

Daniel Wedderburn
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DC DEMOCRATIC STATE COMMITTEE	FEC IDENTIFICATION NUMBER C C00295964
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mr. DAVID MEADOWS

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

Mailing Address
305 K St. SE

Amount
5000.00

City State Zip Code
Washington DC 20003

Transaction ID: SE.4116
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Consulting Fee 001

Name of Federal Candidate supported or Opposed by expenditure:

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
10020.00

Disbursement For: Primary General
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Mr. DAVID MEADOWS

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

Mailing Address
305 K St. SE

Amount
5000.00

City State Zip Code
Washington DC 20003

Transaction ID: SE.4118
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Consulting Fee 001

Name of Federal Candidate supported or Opposed by expenditure:

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
15023.61

Disbursement For: Primary General
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	15023.61

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

Daniel Wedderburn
Signature

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