

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

Montgomery County Democratic Committee

ADDRESS (number and street) 21 East Airy Street

Check if different than previously reported. (ACC)

Norristown PA 19401

2. **FEC IDENTIFICATION NUMBER** C00323253

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 (12S)	

Election on _____ in the State of _____

(d) 30-Day Post -Election Report for the:

<input checked="" type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on 11 02 2010 in the State of PA

5. Covering Period 10 01 2010 through 11 22 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 Kelbin Carolina

Signature of Treasurer Electronically Filed by Kelbin Carolina Date 12 02 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
Montgomery County Democratic Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

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		1259.38
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	1253.98									
(c) Total Receipts (from Line 19)	16715.00	23030.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	17968.98	24289.38								
7. Total Disbursements (from Line 31)	16762.00	23082.40								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1206.98	1206.98								
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
Montgomery County Democratic Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

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)	6350.00	7460.00
(ii) Unitemized	9315.00	14520.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	15665.00	21980.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1050.00	1050.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	16715.00	23030.00
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))	16715.00	23030.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16715.00	23030.00

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
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)	16715.00	23030.00
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	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.....	47.00	52.40
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))..	16762.00	23082.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16762.00	23082.40

DETAILED SUMMARY PAGE
of Disbursements

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)	16715.00	23030.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16715.00	23030.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<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)
Montgomery County Democratic Committee

A.	Full Name (Last, First, Middle Initial) Joseph Charles Bell	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 3100 Ellicott Street NW	Transaction ID: SA11AI.4506
	City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Richard Berkman	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 8017 Seminole Street	Transaction ID: SA11AI.4481
	City State Zip Code Philadelphia PA 19118	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Delchert, LLP Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Marjorie Berlinghof	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address 1433 Gentlemane's Way	Transaction ID: SA11AI.4483
	City State Zip Code Dresher PA 19025	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer retired Occupation not applicable	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Montgomery County Democratic Committee

A.	Full Name (Last, First, Middle Initial) Miriam Finkel		Date of Receipt MM / DD / YYYY 11 / 04 / 2010		
	Mailing Address 512 Woodbrook Lane		Transaction ID: SA11AI.4589		
	City Philadelphia	State PA	Zip Code 19119	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A	Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Julia Fleischner		Date of Receipt MM / DD / YYYY 10 / 19 / 2010		
	Mailing Address 105 Avon Road		Transaction ID: SA11AI.4380		
	City Haverford	State PA	Zip Code 19041	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A	Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Mel Heifetz		Date of Receipt MM / DD / YYYY 10 / 19 / 2010		
	Mailing Address 304 S. 12th Street		Transaction ID: SA11AI.4354		
	City Philadelphia	State PA	Zip Code 19107	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self Employed	Occupation Real Estate Development			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 12
	<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)
Montgomery County Democratic Committee

A.	Full Name (Last, First, Middle Initial) Jamie Jessar		Date of Receipt	
	Mailing Address 287 N. Bowman Ave		M M / D D / Y Y Y Y Y 11 / 04 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.4479
	Merion Station	PA	19066	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		350.00	
Name of Employer Einstein Hospital		Occupation Psychologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		

B.	Full Name (Last, First, Middle Initial) Babette Josephs		Date of Receipt	
	Mailing Address 1939 Waverly Street		M M / D D / Y Y Y Y Y 10 / 19 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.4401
	Philadelphia	PA	19146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Commonwealth of Pennsylvania		Occupation legislator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Jay Minkoff		Date of Receipt	
	Mailing Address 262 Indian Creek Road		M M / D D / Y Y Y Y Y 10 / 19 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.4397
	Wynnewood	PA	19096	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer First Flavor		Occupation President/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	850.00
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 / 12
(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)
Montgomery County Democratic Committee

A.

Full Name (Last, First, Middle Initial)
Thomas Sacks-Wilner

Mailing Address 4 Meadowside Court

City State Zip Code
Medford NJ 08055

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.4504

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Thomas Sacks-Wilner

Mailing Address 4 Meadowside Court

City State Zip Code
Medford NJ 08055

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

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

Transaction ID: SA11AI.4594

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Robert Schoen

Mailing Address 1425 Wightman Street

City State Zip Code
Pittsburgh PA 15217

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

Name of Employer Occupation
University of Pittsburgh professor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

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

Transaction ID: SA11AI.4563

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional)

2300.00

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 / 12
	(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)
Montgomery County Democratic Committee

A.

Full Name (Last, First, Middle Initial) Esther L. Sobel		Date of Receipt MM / DD / YYYY 11 / 04 / 2010
Mailing Address 662 Augusta Court		Transaction ID: SA11AI.4497
City Berwyn	State PA	Zip Code 19312
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Treddyfrin School	Occupation teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Michael Alan Stein		Date of Receipt MM / DD / YYYY 11 / 04 / 2010
Mailing Address 416 E. Church Road		Transaction ID: SA11AI.4477
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	6350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 12
	(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)
Montgomery County Democratic Committee

A.

Full Name (Last, First, Middle Initial) Friends of Diane Morgan		Date of Receipt
Mailing Address PO Box 677		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
City	State	Zip Code
Ambler	PA	19002
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA11C.4555
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="50.00"/>	

B.

Full Name (Last, First, Middle Initial) Willig, Williams & Davidson		Date of Receipt
Mailing Address 1845 Walnut Street, FL 24		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
City	State	Zip Code
Philadelphia	PA	19103
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA11C.4352
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1050.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1050.00"/>

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Montgomery County Democratic Committee	FEC IDENTIFICATION NUMBER C C00323253
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
55 Booth Lane

City Haverford	State PA	Zip Code 19401
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Purpose of Expenditure advertising expenses	Category/ Type 004
--	------------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Joe Sestak

Calendar Year-To-Date Per Election for Office Sought	14085.00
---	-----------------

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

Amount
7770.00

Transaction ID: SE.4282

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

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

Mailing Address
55 Booth Lane

City Haverford	State PA	Zip Code 19401
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Purpose of Expenditure	Category/ Type 004
------------------------	------------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Joe Sestak

Calendar Year-To-Date Per Election for Office Sought	23030.00
---	-----------------

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

Amount
8945.00

Transaction ID: SE.4290

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	16715.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	16715.00

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.

Kelbin Carolina
Signature

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