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

Blogpac

ADDRESS (number and street) ▼ 2340 Powell Street, Suite 282

Check if different than previously reported. (ACC)

Emeryville | CA | 94608

2. **FEC IDENTIFICATION NUMBER** ▼ C00406405

CITY ▲ STATE ▲ ZIPCODE ▲

3. IS THIS REPORT — X 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)
- X January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

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

Election on in the State of

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

Election on in the State of

5. Covering Period 11 23 2004 through 12 31 2004

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 Markos Moulitsas

Signature of Treasurer Electronically Filed by Markos Moulitsas Date 01 12 2005

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. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
Blogpac

Report Covering the Period: From: 11 23 2004 To: 12 31 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		0.00
(b) Cash on Hand at Begining of Reporting Period	8096.14	
(c) Total Receipts (from Line 19)	2060.00	48352.79
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10156.14	48352.79
7. Total Disbursements (from Line 31)	4589.15	37785.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5566.99	5566.99
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)	2000.00	

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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Blogpac

Report Covering the Period: From: 11 23 2004 To: 12 31 2004

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)	2000.00	
(ii) Unitemized	60.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	2060.00	41614.29
(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) ..... ▶	2060.00	41614.29
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	6738.50
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))	2060.00	48352.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2060.00	48352.79

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	5.15	1341.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	5.15	1341.30
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)	250.00	31706.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	4334.00	4738.50
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))	4589.15	37785.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	4589.15	37785.80

DETAILED SUMMARY PAGE

of Disbursements

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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)	2060.00	41614.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2060.00	41614.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5.15	1341.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5.15	1341.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 14
(check only one)
[X] 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)
Blogpac

A. Full Name (Last, First, Middle Initial)
David Lee

Mailing Address 352D Wrightwood Drive

City: Studio City
State: CA
Zip Code: 91604-3943

FEC ID number of contributing federal political committee. C

Name of Employer
Self - David Lee

Occupation
Producer

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date
2000.00

Date of Receipt
12 20 2004

Transaction ID: INC:A:882

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2000.00

TOTAL This Period (last page this line number only) ..... ▶ 2000.00

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b	

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NAME OF COMMITTEE (In Full)
Blogpac

A.
Full Name (Last, First, Middle Initial)
Tranvia, Inc

Mailing Address 16-20 West 19th St., 10th Floor

City: New York
State: NY
Zip Code: 10011

Purpose of Disbursement: Credit Card Fees

Candidate Name

Category/Type: 003

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: EXP:B:86D
Date of Disbursement: 11 / 23 / 2004

Amount of Each Disbursement this Period: 3.70

B.
Full Name (Last, First, Middle Initial)
Tranvia, Inc

Mailing Address 16-20 West 19th St., 10th Floor

City: New York
State: NY
Zip Code: 10011

Purpose of Disbursement: Credit Card Fees

Candidate Name

Category/Type: 003

Office Sought: House / Senate / President
State: District

Disbursement For:
Primary / General / Other (specify)

Transaction ID: EXP:B:873
Date of Disbursement: 12 / 31 / 2004

Amount of Each Disbursement this Period: 1.45

SUBTOTAL of Disbursements This Page (optional) ..... ▶	5.15
TOTAL This Period (last page this line number only) ..... ▶	5.15

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 8 / 14
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Biogpac

FEC IDENTIFICATION NUMBER
C C00406405

Check if 24-hour notice 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee
Kyle Shank

Date
12 21 2004

Mailing Address
504 Georgetown Road

Amount
250.00

Transaction ID: EDT:E:12

City: Wallingford
State: PA
Zip Code: 19086

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

Purpose of Expenditure
Emails opposing Republican Party

Category/ Type

Check One: Support X Oppose

Name of Federal Candidate supported or Opposed by expenditure:
U.S. Republican Party

Disbursement For: Primary X General 2004
Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought 21206.00

(a) **SUBTOTAL** of Itemized Independent Expenditures	**250.00**
(b) **SUBTOTAL** of Unitemized Independent Expenditures	**0.00**
(c) **TOTAL** Independent Expenditures	**250.00**

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.

Markos Moulitsas
Signature

Date 01 12 2005

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☒ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
Blogpac

A.
Full Name (Last, First, Middle Initial)
Jerome Armstrong

Mailing Address 528 South Union Street

City Burlington | State VT | Zip Code 05401

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: PAY:B:879
Date of Disbursement 12 / 02 / 2004

Amount of Each Disbursement this Period 334.00

B.
Full Name (Last, First, Middle Initial)
Matt Stoller

Mailing Address 1739 U Street, NW

City Washington | State DC | Zip Code 20009

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: PAY:B:877
Date of Disbursement 12 / 02 / 2004

Amount of Each Disbursement this Period 3000.00

C.
Full Name (Last, First, Middle Initial)
Matt Stoller

Mailing Address 1739 U Street, NW

City Washington | State DC | Zip Code 20009

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: PAY:B:875
Date of Disbursement 12 / 02 / 2004

Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	4334.00
TOTAL This Period (last page this line number only) ..... ▶	4334.00

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10 / 14 FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Blogpac

Transaction ID: PAY:C:869

LOAN SOURCE Full Name (Last, First, Middle Initial)
Jerome Armstrong

Mailing Address 528 South Union Street

City Burlington State VT ZIP Code 05401

Election:
- [ ] Primary
- [x] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
334.00	334.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 10 D D 25 Y Y Y Y 2004		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... ▶ **0.00**

TOTALS This Period (last page in this line only) ..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 11 / 14 FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Blogpac

Transaction ID: PAY:C:353

LOAN SOURCE Full Name (Last, First, Middle Initial)
Matt Stoller

Mailing Address 1739 U Street, NW

City Washington State DC ZIP Code 20009

Election:
- [ ] Primary
- [x] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	3000.00	2000.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due	Interest Rate	Secured:
10 27 2004		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... ▶ **2000.00**

TOTALS This Period (last page in this line only) ..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 12 / 14 FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Blogpac

Transaction ID: PAY:C:362

LOAN SOURCE Full Name (Last, First, Middle Initial)
Matt Stoller

Mailing Address 1739 U Street, NW

City Washington State DC ZIP Code 20009

Election:
- [ ] Primary
- [x] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	1000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 11 D D 01 Y Y Y Y 2004		0.00 % (apr)	[ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... ▶ **0.00**

TOTALS This Period (last page in this line only) ..... ▶ **2000.00**

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Form/Schedule: **SB26** Loan Repayment
Transaction ID: **PAY:B:875**

Form/Schedule: **SB26** Loan Repayment
Transaction ID: **PAY:B:877**

Form/Schedule: SB26 Loan Repayment
Transaction ID: PAY:B:379