

1920 L STREET NW #800

WASHINGTON DC 20036

FEC ID No. C90005786

24-Hour Notice 48-Hour Notice

SCHEDULE E (FEC Form 3X)

PAGE OF 1 / 2
FOR LINE 24 OF FORM 3X

ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LEAGUE OF CONSERVATION VOTERS INC	FEC IDENTIFICATION NUMBER C C90005786
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Ed Larsen	Date M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
--	--

Mailing Address 1023 Fairhill St	Amount 15.00
-------------------------------------	-----------------

City Philadelphia State PA Zip Code 19147	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: - <input type="checkbox"/> Presidential
Purpose of Expenditure miscellaneous canv expense	Category/ Type

Name of Federal Candidate supported or Opposed by expenditure: Casey Bob	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought	2073.89	Transaction ID: SE.00000
---	---------	--------------------------

Full Name (Last, First, Middle, Initial) of Payee Ed Larsen	Date M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
--	--

Mailing Address 1023 Fairhill St	Amount 15.00
-------------------------------------	-----------------

City Philadelphia State PA Zip Code 19147	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential
Purpose of Expenditure miscellaneous canvass- ing expense	Category/ Type

Name of Federal Candidate supported or Opposed by expenditure: Sestak Joe	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought	765.11	Transaction ID: SE.00001
---	--------	--------------------------

(a) SUBTOTAL of Itemized Independent Expenditures	30.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(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.

Barbara McIntosh
Signature

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 6

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

24-Hour Notice 48-Hour Notice

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 2 / 2
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
LEAGUE OF CONSERVATION VOTERS INC

FEC IDENTIFICATION NUMBER
C C90005786

Check if 24-hour notice 48-hour notice

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

Travis Diaz

Date
M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 6

Mailing Address
1501 Indian School Rd. NE Apt B102

Amount
150.00

City State Zip Code
Albuquerque NM 87102

Office Sought: House State: NM
 Senate District: 01
 Presidential

Purpose of Expenditure
canvasser payment for services
Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
Madrid Patricia

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 66258.71

Disbursement For: Primary General 2006
 Other (specify) : _____

Transaction ID: SE.00002

(a) SUBTOTAL of Itemized Independent Expenditures

150.00

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures

180.00

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.

Barbara McIntosh
Signature

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 6