

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
Progressive Patriots Fund

ADDRESS (number and street) PO Box 628008
 Check if different than previously reported. (ACC)
Middleton WI 53562

2. **FEC IDENTIFICATION NUMBER** C00409136
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:
 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 09 01 2007 through 09 30 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 Cole F Leystra-Assistant Treasurer

Signature of Treasurer Electronically Filed by Cole F Leystra-Assistant Treasurer Date 10 19 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Progressive Patriots Fund

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		58929.85
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	203827.65									
(c) Total Receipts (from Line 19)	49004.30	875465.45								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	252831.95	934395.30								
7. Total Disbursements (from Line 31)	59558.33	741121.68								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	193273.62	193273.62								
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
Progressive Patriots Fund

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	28942.97	410406.54
(i) Itemized (use Schedule A)	19874.41	455614.79
(ii) Unitemized	48817.38	866021.33
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	7500.00
(c) Other Political Committees (such as PACs)	48817.38	873521.33
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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	534.41
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	186.92	1409.71
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))	49004.30	875465.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	49004.30	875465.45

DETAILED SUMMARY PAGE

of Disbursements

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.....	57508.33	687006.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	57508.33	687006.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	46000.00
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	50.00	7615.00
(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))	50.00	7615.00
29. Other Disbursements.....	0.00	500.00
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))..	59558.33	741121.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	59558.33	741121.68

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)	48817.38	873521.33
34. Total Contribution Refunds (from Line 28(d))	50.00	7615.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48767.38	865906.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	57508.33	687006.68
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	534.41
38. Net Operating Expenditures (subtract Line 37 from Line 36)	57508.33	686472.27

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Ratib Ahmad

Mailing Address 936 E New Haven Ave

City State Zip Code
Melbourne FL 32901

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

Name of Employer Continental Flambe Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 307.50

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2007

Transaction ID: SA11A1.105003

Amount of Each Receipt this Period
307.50

In-kind - Event Expense:
Food & Beverage

B. Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address

City State Zip Code

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

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.25

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2007

Transaction ID: SA11A1.103944

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Paul Auslander

Mailing Address 224 Pebblerock Ct

City State Zip Code
Orlando FL 32828

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

Name of Employer American Financial Advisors Occupation Chairman & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11A1.103953

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	567.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 51
	<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Douglas Beam		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address P.O. Box 640		Transaction ID: SA11A1.103986	
City Melbourne	State FL	Amount of Each Receipt this Period 1000.00	
Zip Code 32902			
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Bruce Beck		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2007	
Mailing Address 6302 Bradley Pl		Transaction ID: SA11A1.103987	
City Madison	State WI	Amount of Each Receipt this Period 30.00	
Zip Code 53711			
FEC ID number of contributing federal political committee. C			
Name of Employer University of Wisconsin - Madison	Occupation Policy and Planning Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mary Brown Weiss		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 1051 Port Malabar Blvd, NE, Ste 6		Transaction ID: SA11A1.104033	
City Palm Beach	State FL	Amount of Each Receipt this Period 2500.00	
Zip Code 32905			
FEC ID number of contributing federal political committee. C			
Name of Employer Weiss & Newberry Medical Assoc	Occupation Psychologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional) ▶	3530.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Mary Brown Weiss

Mailing Address 1051 Port Malabar Blvd, NE, Ste 6

City State Zip Code
Palm Beach FL 32905

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

Name of Employer Weiss & Newberry Medical Assoc
Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11A1.104886

Amount of Each Receipt this Period
2500.00

\$2,500 reattributed to spouse, 10/10/07

B. Full Name (Last, First, Middle Initial)
Valerie Bruel

Mailing Address 936 E New Haven Ave

City State Zip Code
Melbourne FL 32901

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

Name of Employer Continental Flambe
Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.50

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2007

Transaction ID: SA11A1.105000

Amount of Each Receipt this Period
307.50

In-kind - Event Expense:
Food & Beverage

C. Full Name (Last, First, Middle Initial)
John Bush

Mailing Address 17242 Henry St.

City State Zip Code
Lansing IL 60438

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

Name of Employer University of Chicago
Occupation Service Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2007

Transaction ID: SA11A1.104041

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	2837.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
William Campbell

Mailing Address 4965 S Nicolet Dr

City State Zip Code
New Berlin WI 53151

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

Name of Employer
Anesthesiology Associates of Wisconsin

Occupation
Anesthesiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 20 / 2007

Transaction ID: SA11A1.104047

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Reed C Cary

Mailing Address 525 E. Strawbridge Ave.

City State Zip Code
Melbourne FL 32901

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

Name of Employer
Reed C. Cary, P.A.

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11A1.104049

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Greg Caucutt

Mailing Address 716 28th Street, NW

City State Zip Code
Rochester MN 55901

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

Name of Employer
Rochester Technology Center

Occupation
Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11A1.104050

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	1850.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Mark Cebulski

Mailing Address 920 East Sylvan Ave

City State Zip Code
Whitefish Bay WI 53217-5354

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

Name of Employer Occupation
Cedarburg School District Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2007

Transaction ID: SA11A1.104052

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
John Cerny

Mailing Address N3643 Heights Dr

City State Zip Code
Bryant WI 54418

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

Name of Employer Occupation
Lena Public Schools Guidance Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 05 / 2007

Transaction ID: SA11A1.104053

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
John Curran

Mailing Address 440 Bay Point Drive

City State Zip Code
Melbourne FL 32935

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

Name of Employer Occupation
Gray and Curran, PC Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2007

Transaction ID: SA11A1.104104

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Mr H. Stewart Dunn, Jr

Mailing Address 1700 Pennsylvania Ave NW

City Washington State DC Zip Code 20006

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

Name of Employer Irvins, Phillips and Barker
Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 07 / 2007

Transaction ID: SA11A1.104168

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Anita Eble

Mailing Address 19 Oak Vale Avenue

City Berkeley State CA Zip Code 94705

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

Name of Employer Retired
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 20 / 2007

Transaction ID: SA11A1.104175

Amount of Each Receipt this Period
140.00

C. Full Name (Last, First, Middle Initial)
Dr. Gordon Faulkner

Mailing Address 3033 Irvington Way

City Madison State WI Zip Code 53713

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

Name of Employer Self-Employed
Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 07 / 2007

Transaction ID: SA11A1.104212

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	5390.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 51
	<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Judith Faulkner		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2007	
Mailing Address 3033 Irvington Way		Transaction ID: SA11A1.104213	
City State Zip Code Madison WI 53713	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Epic Systems Corporation	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Curtis Fowle		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2007	
Mailing Address 1611 Cold Spring Rd, Apt 224 Ste 224		Transaction ID: SA11A1.104233	
City State Zip Code Williamstown MA 01267-2776	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) C. Renea Frederick		Date of Receipt M M / D D / Y Y Y Y Y 09 / 19 / 2007	
Mailing Address W8186 Highland Ave.		Transaction ID: SA11A1.104239	
City State Zip Code Merrill WI 54452	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer FM Enterprises	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

SUBTOTAL of Receipts This Page (optional) ▶	5300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
John Goff

Mailing Address 601 Greenbrier Drive

City Northport State AL Zip Code 35473

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

Name of Employer Self-Employed Occupation Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2007

Transaction ID: SA11A1.104267

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Stefanie Halpern

Mailing Address 26 White House Rd

City White Plains State NY Zip Code 10607

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

Name of Employer St Vincent's Hospital Occupation Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2007

Transaction ID: SA11A1.104305

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Ralph Heath

Mailing Address W524 Horseshoe Place

City La Crosse State WI Zip Code 54601

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

Name of Employer Ovation Marketing Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2007

Transaction ID: SA11A1.104328

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	375.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 51
	<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Dr. Steven Jonas, MD		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2007
Mailing Address PO Box 843		Transaction ID: SA11A1.104386
City State Zip Code East Setauket NY 11733	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer SUNY Stony Brook	Occupation Professor - Preventive Medicine	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Michael Newberry, M.D.		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007
Mailing Address 90 Palmer Loop		Transaction ID: SA11A1.104547
City State Zip Code Eagle CO 81631	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Weiss & Newberry Medical Assoc	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) C. Karen Pieper		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2007
Mailing Address 4119 Blaisdell Ave		Transaction ID: SA11A1.104603
City State Zip Code Minneapolis MN 55409	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer All Saints Lutheran Church	Occupation Music Director	
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) ▶	2400.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Sharai Pollock

Mailing Address 131 County Rd W

City State Zip Code
River Falls WI 54022-5402

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

Name of Employer Wells Fargo Occupation Business Systems Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.80

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11A1.104616

Amount of Each Receipt this Period
17.76

B. Full Name (Last, First, Middle Initial)
Steve Rasmussen

Mailing Address N11825 County Rd F

City State Zip Code
Boyceville WI 54725

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2007

Transaction ID: SA11A1.104633

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Michael Reinke

Mailing Address R9701 County Rd Q

City State Zip Code
Hatley WI 54440

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

Name of Employer US Postal Service Occupation Letter Carrier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11A1.104637

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	367.76
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 51
	<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Jean Rowntree		Date of Receipt MM / DD / YYYY 09 / 28 / 2007
Mailing Address 5453 The Willows Dr		Transaction ID: SA11A1.104672
City Melbourne	State FL	Zip Code 32934
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Island Realty	Occupation Real Estate Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ruth Schorer		Date of Receipt MM / DD / YYYY 09 / 19 / 2007
Mailing Address 68 Tamalpais Rd		Transaction ID: SA11A1.104712
City Berkeley	State CA	Zip Code 94708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Gail Spencer		Date of Receipt MM / DD / YYYY 09 / 12 / 2007
Mailing Address 216 Burnett Avenue		Transaction ID: SA11A1.104765
City Lake Villa	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional)	570.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 51
	(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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Lisa Stanley		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 211 Rios Court		Transaction ID: SA11A1.104773	
City State Zip Code Palm Bay FL 32909		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Weiss & Newberry Medical Assoc		Occupation Administrative Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Hope Stevens		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2007	
Mailing Address PO Box 1510		Transaction ID: SA11A1.104786	
City State Zip Code Helena MT 59624		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Hope Stevens		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2007	
Mailing Address PO Box 1510		Transaction ID: SA11A1.104787	
City State Zip Code Helena MT 59624		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
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) ▶	2600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Mr Donald Strong

Mailing Address 200 Carriage Hills Cir

City State Zip Code
Martinez GA 30907-8228

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

Name of Employer
Quality Health Care Services, Inc

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2007

Transaction ID: SA11A1.104804

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Daniel Suits

Mailing Address 1446 Karlin Court

City State Zip Code
East Lansing MI 48823

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

Name of Employer
Retired

Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 19 / 2007

Transaction ID: SA11A1.104808

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ann Teras

Mailing Address 2942 Legation St NW

City State Zip Code
Washington DC 20015-1214

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

Name of Employer
Teras & Wilde, PLLC

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11A1.104827

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Kathryn Theofilos

Mailing Address 2443 Casa De Marbella Dr.

City State Zip Code
Palm Beach Gardens FL 33410

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

Name of Employer Self-Employed Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11A1.104829

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Irene Touzeau

Mailing Address 520 Clearwater Lake Drive

City State Zip Code
Polk City FL 33868

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

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1009.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2007

Transaction ID: SA11A1.104838

Amount of Each Receipt this Period
45.00

C. Full Name (Last, First, Middle Initial)
Irene Touzeau

Mailing Address 520 Clearwater Lake Drive

City State Zip Code
Polk City FL 33868

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

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1064.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: SA11A1.104841

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 51
	<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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Irene Touzeau

Mailing Address 520 Clearwater Lake Drive

City State Zip Code
Polk City FL 33868

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1117.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2007

Transaction ID: SA11A1.104840

Amount of Each Receipt this Period
53.00

B. Full Name (Last, First, Middle Initial)
Irene Touzeau

Mailing Address 520 Clearwater Lake Drive

City State Zip Code
Polk City FL 33868

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1166.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2007

Transaction ID: SA11A1.104839

Amount of Each Receipt this Period
49.00

C. Full Name (Last, First, Middle Initial)
Donald Vliegenthart

Mailing Address 522 Bahama Dr

City State Zip Code
Indian Harbour Bea FL 32937

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

Name of Employer Self-Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2007

Transaction ID: SA11A1.104864

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	602.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 51
	(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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Mary Webster

Mailing Address 130 La Fitte Street

City State Zip Code
Mandeville LA 70448

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

Name of Employer Occupation
Richmond Medical Clinic Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2007

Transaction ID: SA11A1.104882

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Dr. Gary Weiss, M.D.

Mailing Address 1051 Port Malabar Blvd NE #6

City State Zip Code
Palm Bay FL 32905

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

Name of Employer Occupation
Self-Employed Neurologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
553.21

Date of Receipt
MM / DD / YYYY
09 / 08 / 2007

Transaction ID: SA11A1.104993

Amount of Each Receipt this Period
553.21

In-kind - Event Expense:
Catering

SUBTOTAL of Receipts This Page (optional)	▶	603.21
TOTAL This Period (last page this line number only)	▶	28942.97

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 22 / 51	
	(check only one)			
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Park Bank

Mailing Address 1801 Greenway Cross

City State Zip Code
Madison WI 53708

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1239.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA17.104998

Amount of Each Receipt this Period
186.92

Interest Income

SUBTOTAL of Receipts This Page (optional)	▶	186.92
TOTAL This Period (last page this line number only)	▶	186.92

**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 23 / 51

<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Ratib Ahmad		Transaction ID: SB21B.105005 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 7	
Mailing Address 936 E New Haven Ave		Amount of Each Disbursement this Period 307.50	
City Melbourne State FL Zip Code 32901	Purpose of Disbursement In-kind - Event Expense: Food & Beverage	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) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B.104934 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7	
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 5.95	
City New York State NY Zip Code 10285	Purpose of Disbursement Banking Fee	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) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B.104956 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 7	
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 81.99	
City New York State NY Zip Code 10285	Purpose of Disbursement Banking Fee	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) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	395.44
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 24 / 51

<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Valerie Bruel		Transaction ID: SB21B.105002 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2007
Mailing Address 936 E New Haven Ave		Amount of Each Disbursement this Period 307.50
City Melbourne State FL Zip Code 32901	Purpose of Disbursement In-kind - Event Expense: Food & Beverage	
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) ▼	

Full Name (Last, First, Middle Initial) B. Charter Communications		Transaction ID: SB21B.104988 Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2007
Mailing Address 2701 Daniels St		Amount of Each Disbursement this Period 25.54
City Madison State WI Zip Code 53718	Purpose of Disbursement Internet Service	
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) ▼	

Full Name (Last, First, Middle Initial) C. Cole Leystra		Transaction ID: SB21B.104942 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2007
Mailing Address 2898 Mickelson Pkwy, #204		Amount of Each Disbursement this Period 813.59
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll	
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) ▶	1146.63
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Cole Leystra		Transaction ID: SB21B.103899 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2007	
Mailing Address 2898 Mickelson Pkwy, #204		Amount of Each Disbursement this Period 63.24	
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Reimbursement: See Memo Entry	Category/Type	
Candidate Name	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: SB21B.103899.0 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2007	
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 63.24	
City Coppell State TX Zip Code 75019	Purpose of Disbursement Administrative Expense: Office Supplies	Category/Type	
Candidate Name	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Cole Leystra		Transaction ID: SB21B.104979 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2007	
Mailing Address 2898 Mickelson Pkwy, #204		Amount of Each Disbursement this Period 813.60	
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll	Category/Type	
Candidate Name	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	876.84
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Comcast		Transaction ID: SB21B.104938 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 7
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 49.45
City Southeastern	State PA Zip Code 19398-3005	
Purpose of Disbursement Internet Service		Category/ Type
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. David Kreisman		Transaction ID: SB21B.104944 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 7
Mailing Address 511 W Main St Apt 303		Amount of Each Disbursement this Period 760.80
City Madison	State WI Zip Code 53703	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) C. David Kreisman		Transaction ID: SB21B.104980 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address 511 W Main St Apt 303		Amount of Each Disbursement this Period 760.80
City Madison	State WI Zip Code 53703	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
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) ▶	1571.05
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Deer Park		Transaction ID: SB21B.104967 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2007
Mailing Address 215 6661 Dixie Hwy, Suite 4		Amount of Each Disbursement this Period 20.54
City Louisville State KY Zip Code 40258	Purpose of Disbursement Administrative Expense: Office Supplies 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Department of Employment Services		Transaction ID: SB21B.104943 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2007
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 0.92
City Washington State DC Zip Code 20001	Purpose of Disbursement Administrative Assessment Tax 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Department of Employment Services		Transaction ID: SB21B.104946 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2007
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 12.34
City Washington State DC Zip Code 20001	Purpose of Disbursement Unemployment Tax Withheld 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) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	33.80
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Department of Employment Services		Transaction ID: SB21B.104981 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2007
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 0.91
City Washington State DC Zip Code 20001	Purpose of Disbursement Administrative Assessment Tax 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Department of Employment Services		Transaction ID: SB21B.104984 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2007
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 12.33
City Washington State DC Zip Code 20001	Purpose of Disbursement Unemployment Tax Withheld 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Emily Dreke		Transaction ID: SB21B.104952 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2007
Mailing Address 711 13th Street NE		Amount of Each Disbursement this Period 402.86
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll 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) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	416.10
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Emily Dreke		Transaction ID: SB21B.103902 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
Mailing Address 711 13th Street NE		Amount of Each Disbursement this Period 198.55
City Washington State DC Zip Code 20002	Purpose of Disbursement Reimbursement: See Memo Entries & Text 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Postmaster		Transaction ID: SB21B.103902.0 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 19.50
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage 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) ▼	Category/Type [MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Postmaster		Transaction ID: SB21B.103902.1 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 16.25
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage 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) ▼	Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	198.55
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Emily Dreke		Transaction ID: SB21B.104974 Date of Disbursement 09 / 20 / 2007
Mailing Address 711 13th Street NE		Amount of Each Disbursement this Period 402.86
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Payroll		
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) ▼	

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Transaction ID: SB21B.104949 Date of Disbursement 09 / 06 / 2007
Mailing Address 7805 Mineral Point Rd		Amount of Each Disbursement this Period 52.58
City Madison State WI Zip Code 53717	Category/ Type	
Purpose of Disbursement Copying Expense		
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) ▼	

Full Name (Last, First, Middle Initial) C. George Aldrich		Transaction ID: SB21B.104947 Date of Disbursement 09 / 06 / 2007
Mailing Address 538 N 51st St		Amount of Each Disbursement this Period 1457.63
City Milwaukee State WI Zip Code 53208	Category/ Type	
Purpose of Disbursement Payroll		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1913.07
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. George Aldrich		Transaction ID: SB21B.104982 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address 538 N 51st St		Amount of Each Disbursement this Period 1457.63
City Milwaukee State WI Zip Code 53208	Purpose of Disbursement Payroll 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) ▼	

Full Name (Last, First, Middle Initial) B. Gordon Flesch Co., Inc		Transaction ID: SB21B.104959 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 7
Mailing Address PO Box 992		Amount of Each Disbursement this Period 76.62
City Madison State WI Zip Code 53701	Purpose of Disbursement Copier Rental 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) ▼	

Full Name (Last, First, Middle Initial) C. Greenway Office Center LLC		Transaction ID: SB21B.104930 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 7
Mailing Address 8401 Greenway Blvd		Amount of Each Disbursement this Period 583.18
City Middleton State WI Zip Code 53562	Purpose of Disbursement Office Rent 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) ▶	2117.43
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Landmark Building		Transaction ID: SB21B.104932
Mailing Address 316 N Milwaukee St.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2007
City Milwaukee	State WI	Zip Code 53202
Purpose of Disbursement Office Rent	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 500.00	

Full Name (Last, First, Middle Initial) B. Lenee Kruse		Transaction ID: SB21B.104940
Mailing Address 320 Constitution Ave NE Apt 14		Date of Disbursement MM / DD / YYYY 09 / 06 / 2007
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 1165.02	

Full Name (Last, First, Middle Initial) C. Lenee Kruse		Transaction ID: SB21B.104977
Mailing Address 320 Constitution Ave NE Apt 14		Date of Disbursement MM / DD / YYYY 09 / 20 / 2007
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 1165.01	

SUBTOTAL of Disbursements This Page (optional)	2830.03
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. M&T Bank		Transaction ID: SB21B.104933	
Mailing Address 25 S Charles St		Date of Disbursement 09 / 04 / 2007	
City Baltimore	State MD	Zip Code 21201	Amount of Each Disbursement this Period 61.95
Purpose of Disbursement Banking Fee		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) B. M&T Bank		Transaction ID: SB21B.104963	
Mailing Address 25 S Charles St		Date of Disbursement 09 / 11 / 2007	
City Baltimore	State MD	Zip Code 21201	Amount of Each Disbursement this Period 45.77
Purpose of Disbursement Banking Fee		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) C. Mal Warwick and Associates		Transaction ID: SB21B.104966	
Mailing Address 2550 Ninth Street, Suite 103		Date of Disbursement 09 / 17 / 2007	
City Berkeley	State CA	Zip Code 94710-2516	Amount of Each Disbursement this Period 16000.00
Purpose of Disbursement Direct Mail		Category/ Type	
Candidate Name			
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)	16107.72
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Mal Warwick and Associates		Transaction ID: SB21B.104989 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 7
Mailing Address 2550 Ninth Street, Suite 103		Amount of Each Disbursement this Period 10382.50
City Berkeley State CA Zip Code 94710-2516		
Purpose of Disbursement Direct Mail 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) ▼	

Full Name (Last, First, Middle Initial) B. Office of Tax and Revenue		Transaction ID: SB21B.104939 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 7
Mailing Address 941 North Capitol Street, NE		Amount of Each Disbursement this Period 93.50
City Washington State DC Zip Code 20002		
Purpose of Disbursement Income Tax Withheld 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) ▼	

Full Name (Last, First, Middle Initial) C. Office of Tax and Revenue		Transaction ID: SB21B.104976 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address 941 North Capitol Street, NE		Amount of Each Disbursement this Period 93.50
City Washington State DC Zip Code 20002		
Purpose of Disbursement Income Tax Withheld 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) ▶	10569.50
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Park Bank		Transaction ID: SB21B.103909 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 544.61
City Madison State WI Zip Code 53708	Category/ Type	
Purpose of Disbursement Credit Card Payment: See Memo Entries		
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) ▼	

Full Name (Last, First, Middle Initial) B. Postmaster		Transaction ID: SB21B.103909.0 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 30.80
City Madison State WI Zip Code 53714	Category/ Type	
Purpose of Disbursement Administrative Expense: Postage		
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) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Postmaster		Transaction ID: SB21B.103909.1 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 82.66
City Madison State WI Zip Code 53714	Category/ Type	
Purpose of Disbursement Administrative Expense: Postage		
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) ▼	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	544.61
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Staples		Transaction ID: SB21B.103909.2 Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2007	
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 84.14	
City Coppel State TX Zip Code 75019	Purpose of Disbursement Administrative Expense: Office Supplies 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) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: SB21B.103909.3 Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2007	
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 60.09	
City Coppel State TX Zip Code 75019	Purpose of Disbursement Administrative Expense: Office Supplies 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) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: SB21B.103909.4 Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2007	
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 29.58	
City Coppel State TX Zip Code 75019	Purpose of Disbursement Administrative Expense: Office Supplies 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) ▼	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. 1-800-Flowers.com		Transaction ID: SB21B.103909.7 Date of Disbursement MM / DD / YYYY 08 / 15 / 2007	
Mailing Address One Old Country Road Suite 500		Amount of Each Disbursement this Period 52.98 [MEMO ITEM]	
City Carle Place	State NY		Zip Code 11514
Purpose of Disbursement Flowers			Category/ Type
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) B. Park Bank		Transaction ID: SB21B.104945 Date of Disbursement MM / DD / YYYY 09 / 06 / 2007	
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 2574.18	
City Madison	State WI		Zip Code 53708
Purpose of Disbursement 941 Deposit			Category/ Type
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) C. Park Bank		Transaction ID: SB21B.104948 Date of Disbursement MM / DD / YYYY 09 / 06 / 2007	
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 3.65	
City Madison	State WI		Zip Code 53708
Purpose of Disbursement Unemployment Tax Withheld			Category/ Type
Candidate Name			
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) ▶	2577.83
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Park Bank		Transaction ID: SB21B.104955 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 67.95
City Madison State WI Zip Code 53708	Purpose of Disbursement Banking Fee 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Park Bank		Transaction ID: SB21B.104960 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 602.93
City Madison State WI Zip Code 53708	Purpose of Disbursement Banking Fee 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Park Bank		Transaction ID: SB21B.104983 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 2574.18
City Madison State WI Zip Code 53708	Purpose of Disbursement 941 Deposit 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) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	3245.06
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Park Bank		Transaction ID: SB21B.104985 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 3.66
City Madison State WI Zip Code 53708	Purpose of Disbursement Unemployment Tax Withheld	
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) ▼	

Full Name (Last, First, Middle Initial) B. Paula Zellner		Transaction ID: SB21B.104951 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 7
Mailing Address W3034 Twin Creek Rd		Amount of Each Disbursement this Period 870.31
City Porterfield State WI Zip Code 54159	Purpose of Disbursement Payroll	
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) ▼	

Full Name (Last, First, Middle Initial) C. Paula Zellner		Transaction ID: SB21B.104970 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
Mailing Address W3034 Twin Creek Rd		Amount of Each Disbursement this Period 306.25
City Porterfield State WI Zip Code 54159	Purpose of Disbursement Reimbursement: Mileage	
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) ▶	1180.22
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Paula Zellner		Transaction ID: SB21B.104973 Date of Disbursement 09 / 20 / 2007	
Mailing Address W3034 Twin Creek Rd		Amount of Each Disbursement this Period 870.30	
City Porterfield	State WI	Zip Code 54159	
Purpose of Disbursement Payroll		Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) B. Postmaster		Transaction ID: SB21B.104961 Date of Disbursement 09 / 10 / 2007	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 13.95	
City Madison	State WI	Zip Code 53714	
Purpose of Disbursement Administrative Expense: Postage		Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) C. Postmaster		Transaction ID: SB21B.104965 Date of Disbursement 09 / 12 / 2007	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 354.70	
City Madison	State WI	Zip Code 53714	
Purpose of Disbursement Administrative Expense: Postage		Category/ Type	
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1238.95
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Postmaster		Transaction ID: SB21B.104987 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 339.60
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage	
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) ▼	

Full Name (Last, First, Middle Initial) B. Potomac Development, Corp		Transaction ID: SB21B.104931 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 7
Mailing Address 900 2nd St, NE Suite 114		Amount of Each Disbursement this Period 1522.11
City Washington State DC Zip Code 20002	Purpose of Disbursement Office Rent	
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) ▼	

Full Name (Last, First, Middle Initial) C. Quickbooks Payroll Service		Transaction ID: SB21B.104950 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 7
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 80.75
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Payroll Processing Fee	
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) ▶	1942.46
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Quickbooks Payroll Service		Transaction ID: SB21B.104986 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 19.25
City Mountain View State CA Zip Code 94043		
Purpose of Disbursement Payroll Processing Fee		Category/ Type
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Sharegroup, Inc		Transaction ID: SB21B.104992 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 7
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 3401.00
City Boston State MA Zip Code 02205-5183		
Purpose of Disbursement Telemarketing Fees		Category/ Type
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: SB21B.104962 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 60.93
City Coppell State TX Zip Code 75019		
Purpose of Disbursement Administrative Expense: Office Supplies		Category/ Type
Candidate Name		
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) ▶	3481.18
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)

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<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)
Progressive Patriots Fund

A. Staples Full Name (Last, First, Middle Initial) Staples Mailing Address P.O. Box 469 City Coppell State TX Zip Code 75019 Purpose of Disbursement Administrative Expense: Office Supplies 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.104964 Date of Disbursement: M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period: 83.58 Category/Type
--	--	--

B. Staples Full Name (Last, First, Middle Initial) Staples Mailing Address P.O. Box 469 City Coppell State TX Zip Code 75019 Purpose of Disbursement Administrative Expense: Office Supplies 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.104972 Date of Disbursement: M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period: 131.28 Category/Type
--	--	---

C. StreamGuys, Inc Full Name (Last, First, Middle Initial) StreamGuys, Inc Mailing Address PO Box 828 City Arcata State CA Zip Code 95518 Purpose of Disbursement Online Video Hosting 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.104968 Date of Disbursement: M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7 Amount of Each Disbursement this Period: 290.00 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	504.86
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. TDS Telecom		Transaction ID: SB21B.104971 Date of Disbursement MM / DD / YYYY 09 / 17 / 2007
Mailing Address PO Box 620070		Amount of Each Disbursement this Period 165.66
City Middleton	State WI Zip Code 53562	
Purpose of Disbursement Phone Expense		Category/ Type
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Time Warner Cable		Transaction ID: SB21B.104969 Date of Disbursement MM / DD / YYYY 09 / 17 / 2007
Mailing Address PO Box 3237		Amount of Each Disbursement this Period 44.05
City Milwaukee	State WI Zip Code 53201	
Purpose of Disbursement Internet Service		Category/ Type
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) C. Trevor Miller		Transaction ID: SB21B.104941 Date of Disbursement MM / DD / YYYY 09 / 06 / 2007
Mailing Address W205S8335 Pasadena Dr		Amount of Each Disbursement this Period 1137.29
City Muskego	State WI Zip Code 53150	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
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) ▶	1347.00
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Trevor Miller		Transaction ID: SB21B.104978 Date of Disbursement 09 / 20 / 2007	
Mailing Address W205S8335 Pasadena Dr		Amount of Each Disbursement this Period 1137.30	
City Muskego	State WI	Zip Code 53150	Category/ Type
Purpose of Disbursement Payroll		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: SB21B.104935 Date of Disbursement 09 / 05 / 2007	
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 125.92	
City Baltimore	State MD	Zip Code 21297-0513	Category/ Type
Purpose of Disbursement Phone Expense		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: SB21B.104957 Date of Disbursement 09 / 10 / 2007	
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 68.39	
City Baltimore	State MD	Zip Code 21297-0513	Category/ Type
Purpose of Disbursement Phone Expense		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1331.61
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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: SB21B.104937	
Mailing Address PO Box 17464		Date of Disbursement MM / DD / YYYY 09 / 05 / 2007	
City Baltimore	State MD	Zip Code 21297	Amount of Each Disbursement this Period 46.39
Purpose of Disbursement Cell Phone Expense		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB21B.104990	
Mailing Address PO Box 17464		Date of Disbursement MM / DD / YYYY 09 / 24 / 2007	
City Baltimore	State MD	Zip Code 21297	Amount of Each Disbursement this Period 86.60
Purpose of Disbursement Cell Phone Expense		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) C. Voicetext Interactive		Transaction ID: SB21B.104958	
Mailing Address 211 East 7th Street, 12th Floor		Date of Disbursement MM / DD / YYYY 09 / 10 / 2007	
City Austin	State TX	Zip Code 78701	Amount of Each Disbursement this Period 23.73
Purpose of Disbursement Conference Call Fees		Category/ Type	
Candidate Name			
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)	156.72
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Dr. Gary Weiss, M.D.		Transaction ID: SB21B.104994 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 7
Mailing Address 1051 Port Malabar Blvd NE #6		Amount of Each Disbursement this Period 553.21
City State Zip Code Palm Bay FL 32905	Purpose of Disbursement In-kind - Event Expense: Catering	
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) ▼	

Full Name (Last, First, Middle Initial) B. Wisconsin Department of Revenue		Transaction ID: SB21B.104953 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 7
Mailing Address PO Box 8902		Amount of Each Disbursement this Period 400.56
City State Zip Code Madison WI 53708	Purpose of Disbursement Income Tax Withheld	
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) ▼	

Full Name (Last, First, Middle Initial) C. Wisconsin Department of Revenue		Transaction ID: SB21B.104975 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address PO Box 8902		Amount of Each Disbursement this Period 400.56
City State Zip Code Madison WI 53708	Purpose of Disbursement Income Tax Withheld	
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) ▶	1354.33
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)

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<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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial)

A. WPS Health Insurance

Mailing Address 1717 W. Broadway
P.O. Box 8190

City Madison State WI Zip Code 53708

Purpose of Disbursement
Insurance Premiums

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.104929

Date of Disbursement

/ /

Amount of Each Disbursement this Period

362.06

SUBTOTAL of Disbursements This Page (optional)

362.06

TOTAL This Period (last page this line number only)

57443.05

**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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Citizens for Harkin		Transaction ID: SB23.103924 Date of Disbursement 09 / 28 / 2007
Mailing Address PO Box 811		Amount of Each Disbursement this Period 1000.00
City Des Moines	State IA Zip Code 50304	
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Thomas Richard Harkin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 00		

Full Name (Last, First, Middle Initial) B. Friends of Jay Rockefeller		Transaction ID: SB23.103921 Date of Disbursement 09 / 28 / 2007
Mailing Address PO Box 1909		Amount of Each Disbursement this Period 1000.00
City Charleston	State WV Zip Code 25327	
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name John Davison Rockefeller, IV		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 00		

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	2000.00

Image# 27931475380

Form/Schedule: **SB21B** All disbursements documented as Line 21b, Federal Operating Expenditures, are in support of the committee itself and did not serve as contributions to any other candidate, federal or non-federal.
Transaction ID: **SB21B.104934**

Form/Schedule: **SB21B** This disbursement includes \$162.80 in unitemized expenses including \$134.80 to Alamo for car rental and \$28 in taxi fares.
Transaction ID: **SB21B.103962**

Image# 27931475381

Form/Schedule: **SB21B** This disbursement includes \$204.36 in unitemized expenses including \$128 to MPEA Trade Show for utilities serv-
Transaction ID: **SB21B.103909** for a convention booth and \$76.36 to West Wind Supper Club for food and beverage.
