

**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

Democratic Properties Corporation-Federal

ADDRESS (number and street)

430 South Capitol Street, SE

Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00384479

3. IS THIS  
REPORTNEW  
(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

07

01

2009

through

07

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Andrew Tobias

Signature of Treasurer

Electronically Filed by Andrew Tobias

Date

11

13

2009

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 33

Write or Type Committee Name  
Democratic Properties Corporation-Federal

Report Covering the Period: From: M M  
0 7 D D  
0 1 Y Y Y Y  
2 0 0 9 To: M M  
0 7 D D  
3 1 Y Y Y Y  
2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 9</span>		73926.23
(b) Cash on Hand at Beginning of Reporting Period .....	229022.07	
(c) Total Receipts (from Line 19) .....	177459.00	1318421.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	406481.07	1392347.23
7. Total Disbursements (from Line 31) .....	183412.29	1169278.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	223068.78	223068.78
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Democratic Properties Corporation-Federal

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	W	Y
2	0	0	9

To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	176609.00	1312471.00
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) .....	850.00	5950.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	177459.00	1318421.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	177459.00	1318421.00

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	179629.52	952030.99	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	179629.52	952030.99	
22. Transfers to Affiliated/Other Party Committees.....	3782.77	217247.46	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
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 .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	183412.29	1169278.45	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	183412.29	1169278.45	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	179629.52	952030.99
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	850.00	5950.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	178779.52	946080.99

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

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

FOR LINE NUMBER: PAGE 6 / 33

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET, S.E.

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519031.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA12-2702

Amount of Each Receipt this Period

59900.00

Property Lease

**B.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET, S.E.

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519031.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA12-2700

Amount of Each Receipt this Period

4218.00

Property Lease

**C.**

Full Name (Last, First, Middle Initial)

DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 6 / 2 0 0 9

Transaction ID: SA12-2701

Amount of Each Receipt this Period

106488.00

Property Lease

**SUBTOTAL** of Receipts This Page (optional) .....

170606.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 / 33

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

793440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	9

Transaction ID: SA12-2699

Amount of Each Receipt this Period

6003.00

Property Lease

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

6003.00

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

176609.00

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

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

FOR LINE NUMBER: PAGE 8 / 33

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

LEVIN FOR CONGRESS

Mailing Address 8322 E. 12 MILE ROAD

City

WARREN

State

MI

Zip Code

48093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

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

Transaction ID: SA15-2704

Amount of Each Receipt this Period

150.00

Property Lease

**B.**

Full Name (Last, First, Middle Initial)

Friends of Jim Oberstar

Mailing Address 222 W. 1st St.

City

DULUTH

State

MN

Zip Code

55802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA15-2703

Amount of Each Receipt this Period

150.00

Property Lease

**C.**

Full Name (Last, First, Middle Initial)

MCNERNEY FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 12022

City

PLEASANTON

State

CA

Zip Code

94588

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

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

Transaction ID: SA15-2706

Amount of Each Receipt this Period

150.00

Property Lease

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 33

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)  
CHET EDWARDS FOR CONGRESS

Mailing Address P.O. BOX 23273

City State Zip Code  
WACO TX 76702-3273

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA15-2705

Amount of Each Receipt this Period

150.00

Property Lease

**B.**

Full Name (Last, First, Middle Initial)  
ALECIA DYER

Mailing Address 914 NORTH CAROLINA AVE. SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

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

Transaction ID: SA15-2708

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
MICHAEL MCCOURT

Mailing Address 657 RHODES HALL

City State Zip Code  
ITHACA NY 14853

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

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

Transaction ID: SA15-2709

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 33

(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"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS OF BENNIE THOMPSON

Mailing Address P.O. BOX 100

City

BOLTON

State

MS

Zip Code

93041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA15-2707

Amount of Each Receipt this Period

150.00

Property Lease

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

150.00

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

850.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 33

<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)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

DC WATER AND SEWER AUTHORITY CUSTOMER SERVICE DEPARTMENT

Mailing Address P O BOX 97200

City  
WASHINGTON

State  
DC

Zip Code  
20090

Purpose of Disbursement  
Water & Sewage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2600

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

1279.39

B.

Full Name (Last, First, Middle Initial)

DC WATER AND SEWER AUTHORITY CUSTOMER SERVICE DEPARTMENT

Mailing Address P O BOX 97200

City  
WASHINGTON

State  
DC

Zip Code  
20090

Purpose of Disbursement  
Water & Sewage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2601

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

901.31

C.

Full Name (Last, First, Middle Initial)

Synina Pugh

Mailing Address 2359 Ontario Rd. NW  
201

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2602

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

14.00

SUBTOTAL of Disbursements This Page (optional) .....

2194.70

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

Plant Works

Mailing Address 14504 Lee Road  
Unit E

City Chantilly State VA Zip Code 20151

Purpose of Disbursement  
Landscaping Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2603

Date of Disbursement

/   /

Amount of Each Disbursement this Period

58.16

**B.**

Full Name (Last, First, Middle Initial)

WASTE MANAGEMENT OF MD

Mailing Address PO BOX 13648

City PHILADELPHIA State PA Zip Code 19101-3648

Purpose of Disbursement  
Bulk Trash Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2604

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1763.82

**C.**

Full Name (Last, First, Middle Initial)

PEPCO ENERGY SERVICES

Mailing Address PO BOX 4863

City TRENTON State NJ Zip Code 08650-4863

Purpose of Disbursement  
Electric Bill

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5959.55

**SUBTOTAL** of Disbursements This Page (optional) .....

7781.53

**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 13 / 33

<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)

Democratic Properties Corporation-Federal

<b>A.</b> Full Name (Last, First, Middle Initial) Capital Antenna Company	<b>Transaction ID:</b> SB21B-2607 <b>Date of Disbursement</b>																				
Mailing Address 5720 Lafayette Palce	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	3		2	0	0	9												
City Hyattsville State MD Zip Code 20781	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Building Maintenance Candidate Name	<table border="1"> <tr> <td colspan="10">9588.69</td> </tr> </table>	9588.69																			
9588.69																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) GSI- Gali Services	<b>Transaction ID:</b> SB21B-2606 <b>Date of Disbursement</b>																				
Mailing Address 6931 Arlington Rd. Suite B	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	3		2	0	0	9												
City Bethesda State MD Zip Code 20814	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Cleaning Maintenance Candidate Name	<table border="1"> <tr> <td colspan="10">8839.64</td> </tr> </table>	8839.64																			
8839.64																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) BANK OF AMERICA COMMERCIAL LOAN SERVICES	<b>Transaction ID:</b> SB21B-2664 <b>Date of Disbursement</b>																				
Mailing Address P.O. BOX 1232	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	9												
City CHARLOTTE State NC Zip Code 28201-1232	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Bank Charges Candidate Name	<table border="1"> <tr> <td colspan="10">23.31</td> </tr> </table>	23.31																			
23.31																					
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) .....

18451.64

**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 14 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City State Zip Code  
DENVER CO 80239

Purpose of Disbursement  
Engineer/Architect Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2608

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City State Zip Code  
DENVER CO 80239

Purpose of Disbursement  
Engineer OT Hours Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2609

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City State Zip Code  
DENVER CO 80239

Purpose of Disbursement  
Engineer OT Hours Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2610

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**10989.50**

**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)

PAGE 15 / 33

<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)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

Genesis Security System LLC

Mailing Address 20459 Seneca Meadows Parkway

City State Zip Code  
Germantown MD 20876

Purpose of Disbursement  
Security Monitoring Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2611

Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

151.43

B.

Full Name (Last, First, Middle Initial)

Genesis Security System LLC

Mailing Address 20459 Seneca Meadows Parkway

City State Zip Code  
Germantown MD 20876

Purpose of Disbursement  
Security Monitoring Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2612

Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

2799.15

C.

Full Name (Last, First, Middle Initial)

LEVEL GREEN LANDSCAPING

Mailing Address 139 12TH STREET, SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
Landscaping Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2613

Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

1739.59

SUBTOTAL of Disbursements This Page (optional) .....

4690.17

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 16 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

LEVEL GREEN LANDSCAPING

Mailing Address 139 12TH STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Landscaping Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2614

Date of Disbursement

/   /

Amount of Each Disbursement this Period

396.56

**B.**

Full Name (Last, First, Middle Initial)

US LIGHTING AND ELECTRICAL

Mailing Address PO BOX 5129

City  
FREDERICKSBURG

State  
VA

Zip Code  
22403

Purpose of Disbursement  
Equip/Purch. General Bldg Materials

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2615

Date of Disbursement

/   /

Amount of Each Disbursement this Period

405.19

**C.**

Full Name (Last, First, Middle Initial)

SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City  
CHICAGO

State  
IL

Zip Code  
60673-3050

Purpose of Disbursement  
Elevator Maintenance maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2618

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2281.78

**SUBTOTAL** of Disbursements This Page (optional) .....

3083.53

**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 17 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City  
CHICAGO

State  
IL

Zip Code  
60673-3050

Purpose of Disbursement  
Elevator Maintenance maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

766.92

**B.**

Full Name (Last, First, Middle Initial)

SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City  
CHICAGO

State  
IL

Zip Code  
60673-3050

Purpose of Disbursement  
Elevator Maintenance maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2620

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1983.78

**C.**

Full Name (Last, First, Middle Initial)

SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City  
CHICAGO

State  
IL

Zip Code  
60673-3050

Purpose of Disbursement  
Elevator Maintenance maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1253.25

**SUBTOTAL** of Disbursements This Page (optional) .....

4003.95

**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)

PAGE 18 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

COMCAST

Mailing Address PO BOX 3005

City  
SOUTHEASTERN

State  
PA

Zip Code  
19398

Purpose of Disbursement

Cable Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2616

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1626.12

**B.**

Full Name (Last, First, Middle Initial)

Central Safe & Lock

Mailing Address 1107 &th St. NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement

Equipment Building

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2617

Date of Disbursement

/   /

Amount of Each Disbursement this Period

135.00

**C.**

Full Name (Last, First, Middle Initial)

GSI- Gali Services

Mailing Address 6931 Arlington Rd.  
Suite B

City  
Bethesda

State  
MD

Zip Code  
20814

Purpose of Disbursement

Cleaning Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

228.42

**SUBTOTAL** of Disbursements This Page (optional) .....

1989.54

**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 19 / 33

<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)

Democratic Properties Corporation-Federal

<b>A.</b> Full Name (Last, First, Middle Initial) Freestate	<b>Transaction ID:</b> SB21B-2623 <b>Date of Disbursement</b>																				
Mailing Address 13335 Mid Atlanatic Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	9												
City State Zip Code Laurel MD 20708	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Electricity/Plumbing Repairs Candidate Name	<table border="1"> <tr> <td colspan="10">514.37</td> </tr> </table>	514.37																			
514.37																					
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																				
<b>B.</b> Full Name (Last, First, Middle Initial) Eagle Mast & Floor Products	<b>Transaction ID:</b> SB21B-2624 <b>Date of Disbursement</b>																				
Mailing Address 932 Hugerford Drive Suite 37B	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	9												
City State Zip Code Rockville MD 20850	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Building Drywall and Painting Candidate Name	<table border="1"> <tr> <td colspan="10">4894.11</td> </tr> </table>	4894.11																			
4894.11																					
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																				
<b>C.</b> Full Name (Last, First, Middle Initial) Eagle Mast & Floor Products	<b>Transaction ID:</b> SB21B-2625 <b>Date of Disbursement</b>																				
Mailing Address 932 Hugerford Drive Suite 37B	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	9												
City State Zip Code Rockville MD 20850	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Maintenance Contract Candidate Name	<table border="1"> <tr> <td colspan="10">80.41</td> </tr> </table>	80.41																			
80.41																					
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) .....

5488.89

**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 20 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

WESTERN PEST SERVICES

Mailing Address 202 PERRY PKWY

City  
GAITHERSBURG

State  
MD

Zip Code  
20877

Purpose of Disbursement  
Exterminating maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2626

Date of Disbursement

/   /

Amount of Each Disbursement this Period

376.47

**B.**

Full Name (Last, First, Middle Initial)

FRAME OF MINE 2007

Mailing Address 522 8TH STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2627

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.10

**C.**

Full Name (Last, First, Middle Initial)

GSI- Gali Services

Mailing Address 6931 Arlington Rd.  
Suite B

City  
Bethesda

State  
MD

Zip Code  
20814

Purpose of Disbursement  
Cleaning Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2628

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5739.05

**SUBTOTAL** of Disbursements This Page (optional) .....

6615.62

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 21 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City  
PALATINEState  
ILZip Code  
60038-0001Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2629

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	9

Amount of Each Disbursement this Period

115.28

**B.**

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City  
PALATINEState  
ILZip Code  
60038-0001Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2630

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	9

Amount of Each Disbursement this Period

203.48

**C.**

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City  
PALATINEState  
ILZip Code  
60038-0001Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2631

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	9

Amount of Each Disbursement this Period

313.96

SUBTOTAL of Disbursements This Page (optional) .....

632.72

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)

PAGE 22 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City  
PALATINE

State  
IL

Zip Code  
60038-0001

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2632

Date of Disbursement

/   /

Amount of Each Disbursement this Period

134.83

**B.**

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City  
PALATINE

State  
IL

Zip Code  
60038-0001

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2633

Date of Disbursement

/   /

Amount of Each Disbursement this Period

163.65

**C.**

Full Name (Last, First, Middle Initial)

BANK OF AMERICA COMMERCIAL LOAN SERVICES

Mailing Address P.O. BOX 1232

City  
CHARLOTTE

State  
NC

Zip Code  
28201-1232

Purpose of Disbursement  
Bank Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2663

Date of Disbursement

/   /

Amount of Each Disbursement this Period

141.65

**SUBTOTAL** of Disbursements This Page (optional) .....

440.13

**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)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City  
CHICAGO

State  
IL

Zip Code  
60673-3050

Purpose of Disbursement  
Building Drywall and Painting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2634

Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

14399.98

B.

Full Name (Last, First, Middle Initial)

SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City  
CHICAGO

State  
IL

Zip Code  
60673-3050

Purpose of Disbursement  
Building Drywall and Painting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2635

Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

1354.14

C.

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City  
DENVER

State  
CO

Zip Code  
80239

Purpose of Disbursement  
Engineer/Architect Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2636

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

9932.00

SUBTOTAL of Disbursements This Page (optional) .....

25686.12

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 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

Eagle Mast & Floor Products

Mailing Address 932 Hugerford Drive  
Suite 37B

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Maintenance Contract

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2637

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

80.41

**B.**

Full Name (Last, First, Middle Initial)

Genesis Security System LLC

Mailing Address 20459 Seneca Meadows Parkway

City Germantown State MD Zip Code 20876

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2638

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

436.94

**C.**

Full Name (Last, First, Middle Initial)

JOHNSON CONTROLS

Mailing Address PO BOX 905240

City CHARLOTTE State NC Zip Code 28290-5240

Purpose of Disbursement  
EMS-System

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2639

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

4262.50

**SUBTOTAL** of Disbursements This Page (optional) .....

4779.85

**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 25 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Salaries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2640

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8162.88

**B.**

Full Name (Last, First, Middle Initial)

DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Salaries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2641

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10864.70

**C.**

Full Name (Last, First, Middle Initial)

RIDGEVIEW GLASS INC.

Mailing Address 9625 FALLARD TERRACE

City  
UPPER MARLBORO

State  
MD

Zip Code  
20772

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2642

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7199.00

**SUBTOTAL** of Disbursements This Page (optional) .....

26226.58

**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 26 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

D C TREASURER DEPT. CON/REGULATORY AFFAIRS

Mailing Address 941 N CAPITOL ST NE, RM 7205

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement

Taxes Payment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2643

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

539.04

**B.**

Full Name (Last, First, Middle Initial)

DTM COPORATION

Mailing Address 1320 FENWICK LANE STE 700

City  
SILVER SPRING

State  
MD

Zip Code  
20910

Purpose of Disbursement

Security

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2644

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

11734.24

**C.**

Full Name (Last, First, Middle Initial)

DTM COPORATION

Mailing Address 1320 FENWICK LANE STE 700

City  
SILVER SPRING

State  
MD

Zip Code  
20910

Purpose of Disbursement

Security

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2645

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

11206.60

**SUBTOTAL** of Disbursements This Page (optional) .....

23479.88

**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 27 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

LEVEL GREEN LANDSCAPING

Mailing Address 139 12TH STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Landscaping Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2646

Date of Disbursement

/   /

Amount of Each Disbursement this Period

396.56

**B.**

Full Name (Last, First, Middle Initial)

LEVEL GREEN LANDSCAPING

Mailing Address 139 12TH STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Landscaping Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2647

Date of Disbursement

/   /

Amount of Each Disbursement this Period

317.25

**C.**

Full Name (Last, First, Middle Initial)

Staples Business Advantage Dept. DC

Mailing Address PO Box 415256

City  
Boston

State  
MA

Zip Code  
02241-5256

Purpose of Disbursement  
Office Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-2648

Date of Disbursement

/   /

Amount of Each Disbursement this Period

147.90

**SUBTOTAL** of Disbursements This Page (optional) .....

861.71

**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 28 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

East Coast Fire Protection

Mailing Address 7526 Connelly Drive  
Suite L

City Hanover State MD Zip Code 20003

Purpose of Disbursement  
Security

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2649

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

1901.25

**B.**

Full Name (Last, First, Middle Initial)

WESTERN PEST SERVICES

Mailing Address 202 PERRY PKWY

City GAITHERSBURG State MD Zip Code 20877

Purpose of Disbursement  
Exterminating maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2650

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

376.47

**C.**

Full Name (Last, First, Middle Initial)

SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City CHICAGO State IL Zip Code 60673-3050

Purpose of Disbursement  
Elevator Maintenance maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2651

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

2281.78

**SUBTOTAL** of Disbursements This Page (optional) .....

4559.50

**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)

PAGE 29 / 33

<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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

WORLD RECYCLING COMPANY

Mailing Address 5600 COLUMBIA PARK ROAD

City State Zip Code  
CHEVERLY MD 20785

Purpose of Disbursement  
Recycle Removal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2652

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)

GSI- Gali Services

Mailing Address 6931 Arlington Rd.  
Suite B

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
Cleaning Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2653

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

8839.64

**C.**

Full Name (Last, First, Middle Initial)

Johnson Towers Inc.

Mailing Address P.O. Box 630804

City State Zip Code  
Baltimore MD 21263-0804

Purpose of Disbursement  
Life Safety maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-2654

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9689.64

**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 30 / 33

<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)

Democratic Properties Corporation-Federal

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Plant Works</p> <p>Mailing Address 14504 Lee Road Unit E</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Landscaping Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-2655</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 58.16</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CAPITOL BUILDING SUPPLY, INC</p> <p>Mailing Address Department #34792</p> <p>City Alexandria State VA Zip Code 22334-0792</p> <p>Purpose of Disbursement Building Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-2656</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 68.96</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) COMCAST</p> <p>Mailing Address PO BOX 3005</p> <p>City SOUTHEASTERN State PA Zip Code 19398</p> <p>Purpose of Disbursement Cable Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-2657</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 3419.70</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3546.82

**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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City State Zip Code  
DENVER CO 80239

Purpose of Disbursement  
Engineer OT Hours Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2658

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12540.00

**B.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City State Zip Code  
DENVER CO 80239

Purpose of Disbursement  
Engineer OT Hours Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

165.00

**C.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City State Zip Code  
DENVER CO 80239

Purpose of Disbursement  
Engineer OT Hours Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2660

Date of Disbursement

/   /

Amount of Each Disbursement this Period

660.00

**SUBTOTAL** of Disbursements This Page (optional) .....

13365.00

**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)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City State Zip Code  
DENVER CO 80239

Purpose of Disbursement  
Engineer OT Hours Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2661

Date of Disbursement

/   /

Amount of Each Disbursement this Period

660.00

**B.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City State Zip Code  
DENVER CO 80239

Purpose of Disbursement  
Engineer OT Hours Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-2662

Date of Disbursement

/   /

Amount of Each Disbursement this Period

412.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1072.50

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

179629.52



# **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 type="checkbox"/> 21b	<input checked="" 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)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET, S.E.

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
HVAC Repairs

Candidate Name  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB22-2599

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3782.77

SUBTOTAL of Disbursements This Page (optional) .....

3782.77

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

3782.77