

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

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PAGE 1 OF 2
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) **COMMITTEE**
BLACK AMERICANS FOR LIFE POLITICAL ACTION

FEC IDENTIFICATION NUMBER
C00224121

Check if 24-hour notice 48-hour notice

Full Name (Last, First, Middle Initial) of Payee
WCAO - AM

Date
10 / 23 / 2006

Mailing Address
711 W 40th STREET

Amount
2340.00

City State Zip Code
BALTIMORE MD 21211

Purpose of Expenditure
RADIO ADS

Category/Type

Office Sought: House State: **MD**
 Senate District:
 President

Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
STEELE, MICHAEL

Calendar Year-To-Date Per Election for Office Sought
446000

Disbursement For: Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payee
WJSS - AM

Date
10 / 23 / 2006

Mailing Address
1605 LEVEL RD

Amount
1200.00

City State Zip Code
HAVRE DE GRACE MD 21078

Purpose of Expenditure
RADIO ADS

Category/Type

Office Sought: House State: **MD**
 Senate District:
 President

Check One: Support Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
STEELE, MICHAEL

Calendar Year-To-Date Per Election for Office Sought
446000

Disbursement For: Primary General
 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures **3540.00**

(b) SUBTOTAL of Unitemized Independent Expenditures **0.00**

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature 

Date **10 / 29 / 2006**

2603924439

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

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PAGE 2 OF 2
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) BLACK AMERICANS FOR LIFE POLITICAL ACTION COMMITTEE 2006 OCT 24 P 1:36 FEC IDENTIFICATION NUMBER C00224121

Check if 24-hour notice 48-hour notice

Full Name (Last, First, Middle Initial) of Payee WWIN - AM Date 10/23/2006

Mailing Address 1705 WHITE HEAD RD. Amount 920.00

City BALTIMORE State MD Zip Code 21207

Purpose of Expenditure RADIO ADS Category/Type

Office Sought: House State: MD
 Senate District: _____
 President

Name of Federal Candidate Supported or Opposed by Expenditure: STEELE, MICHAEL Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 4400.00 Disbursement For: Primary General
 Other (specify) _____

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

Mailing Address _____ Amount _____

City _____ State _____ Zip Code _____

Purpose of Expenditure _____ Category/Type

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

Name of Federal Candidate Supported or Opposed by Expenditure: _____ Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought _____ Disbursement For: Primary General
 Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures 920.00

(b) SUBTOTAL of Unitemized Independent Expenditures 0.00

(c) TOTAL Independent Expenditures 4400.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

[Signature] Date 10/24/2006

26039244394

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/>	Hand Delivered	Date of Receipt <i>10-24-06</i>
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	Delivery Confirmation™ or Signature Confirmation™ Label	<input type="checkbox"/>
<input type="checkbox"/>	USPS Express Mail	Postmarked
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Overnight Delivery Service (Specify):	Shipping Date
		Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/>	Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/>	Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/>	Other (Specify):	Date of Receipt or Postmarked

JWP
 PREPARER

10-24-06
 DATE PREPARED

26039244393