

EMILY's List

1120 Connecticut Avenue NW

Ste 1100

Washington

DC

20036

FEC ID No. C00193433

☒ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
EMILY's List

FEC IDENTIFICATION NUMBER

C C00193433

Check if ☒ 24-hour notice ☐ 48-hour notice

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

Compass Media Group, Inc.

Date

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 0 6

Amount

2625.00

Mailing Address

1415 North Dayton, Suite 311

City

Chicago

State

IL

Zip Code

60622

Purpose of Expenditure

Postage

Category/
Type

004

Office Sought: ☒ House

State: OH

☐ Senate

District: 13

☐ PresidentialCheck One: ☒ Support☐ OpposeDisbursement For: ☒ Primary☐ General 2006☐ Other (specify) : _____

Transaction ID: SE24-86270

Calendar Year-To-Date Per Election

132412.89

for Office Sought

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

Compass Media Group, Inc.

Date

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 0 6

Amount

4464.84

Mailing Address

1415 North Dayton, Suite 311

City

Chicago

State

IL

Zip Code

60622

Purpose of Expenditure

Printing

Category/
Type

004

Office Sought: ☒ House

State: OH

☐ Senate

District: 13

☐ PresidentialCheck One: ☒ Support☐ OpposeDisbursement For: ☒ Primary☐ General 2006☐ Other (specify) : _____

Transaction ID: SE24-86271

Calendar Year-To-Date Per Election

132412.89

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

7089.84

(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.

Caroline Fines

Signature

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 0 6

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

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE OF 2 / 2
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EMILY's List		FEC IDENTIFICATION NUMBER C C00193433	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Compass Media Group, Inc.		Date M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6	
Mailing Address 1415 North Dayton, Suite 311		Amount 2625.00	
City Chicago	State IL	Zip Code 60622	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> Presidential
Purpose of Expenditure Postage	Category/ Type	004	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Thomas Sawyer			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		14179.68	Transaction ID: SE24-86272
Full Name (Last, First, Middle, Initial) of Payee Compass Media Group, Inc.		Date M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6	
Mailing Address 1415 North Dayton, Suite 311		Amount 4464.84	
City Chicago	State IL	Zip Code 60622	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> Presidential
Purpose of Expenditure Printing	Category/ Type	004	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Thomas Sawyer			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		14179.68	Transaction ID: SE24-86273

(a) SUBTOTAL of Itemized Independent Expenditures	7089.84
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	14179.68
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.	
Caroline Fines Signature	M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6