

**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

New Democrat Coalition Political Action Committee AKA NDC PAC

ADDRESS (number and street)

607 14th Street, NW, Suite 800

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00409730

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

05

01

2008

through

05

31

2008

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

D. Adam Smith

Signature of Treasurer

Electronically Filed by D. Adam Smith

Date

06

20

2008

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)

Page 2

Write or Type Committee Name

New Democrat Coalition Political Action Committee AKA NDC PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		209655.95
(b) Cash on Hand at Beginning of Reporting Period	422832.68	
(c) Total Receipts (from Line 19)	43000.00	582800.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	465832.68	792455.95
7. Total Disbursements (from Line 31)	23906.59	350529.86
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	441926.09	441926.09
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

New Democrat Coalition Political Action Committee AKA NDC PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	8

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	2500.00	18300.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	2500.00	18300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	40500.00	564500.00
(c) Other Political Committees (such as PACs)	43000.00	582800.00
(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	0.00
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))	43000.00	582800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	43000.00	582800.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	13906.59	183029.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	13906.59	183029.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	167500.00
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))..	23906.59	350529.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23906.59	350529.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	43000.00	582800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	43000.00	582800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	13906.59	183029.86
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13906.59	183029.86

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

FOR LINE NUMBER: PAGE 6 / 16

(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Cecelia McCloy

Mailing Address 55Ambleside Court

City

Danville

State

CA

Zip Code

94526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Integrated Science Soluti-
ons, Inc.

Occupation

CEO/President

Receipt For:

☐
☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

Transaction ID: C606

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

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

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

FOR LINE NUMBER: PAGE 7 / 16

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Blue Cross Blue Shield of Michigan

Mailing Address 602 West Ionia

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C C00084061

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: C601

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Nortel Political Action Committee

Mailing Address 2325 Dulles Corner Boulevard
10th Floor

City

Herndon

State

VA

Zip Code

20171

FEC ID number of contributing
federal political committee.

C C00167627

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 0 8

Transaction ID: C597

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Namic PAC

Mailing Address 3601 Vincennes Road
P.O. Box 68700

City

Indianapolis

State

IN

Zip Code

46268

FEC ID number of contributing
federal political committee.

C C00170258

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 8 / 2 0 0 8

Transaction ID: C603

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

5500.00

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 8 / 16

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Council of Insurance Agents & Brokers PAC

Mailing Address 701 Pennsylvania Avenue, NW
Suite 750

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00039578

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: C596

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Universal American Corp. PAC

Mailing Address 6 International Drive
Suite 190

City State Zip Code
Rye Brook NY 10573

FEC ID number of contributing
federal political committee.

C C00433029

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 0 8

Transaction ID: C607

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Flour Corporation Political Action Committee

Mailing Address 6700 Las Colinas Boulevard

City State Zip Code
Irving TX 75039

FEC ID number of contributing
federal political committee.

C C00034132

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 8

Transaction ID: C604

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

10000.00

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 / 16

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Travelers Companies, Inc. Political Action Committee

Mailing Address One Tower Square

City

Hartford

State

CT

Zip Code

06183

FEC ID number of contributing
federal political committee.

C C00376376

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 0 8

Transaction ID: C602

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Badger PAC

Mailing Address 1831 Bay Street, SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C C00382242

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 3 / 2 0 0 8

Transaction ID: C605

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Boehringer Ingelheim Political Action Committee

Mailing Address 1201 Pennsylvania Avenue, NW
Suite 315

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00420398

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 8

Transaction ID: C608

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

15000.00

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 / 16

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Union Pacific Corporation Fund for Effective Government

Mailing Address 600 13th Street, NW
Suite 340

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00010470

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: C600

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Wal-Mart Stores, Inc, Wal-PAC

Mailing Address 702 SW 8th Street

City State Zip Code
Bentonville AR 72716

FEC ID number of contributing
federal political committee.

C C00093054

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 2 / 2 0 0 8

Transaction ID: C609

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

40500.00

**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 11 / 16

<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)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Citigroup, Inc.

Transaction ID: D644

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	8

Mailing Address 1101 Pennsylvania Avenue, N.W.
Suite 400

Amount of Each Disbursement this Period

City Washington State DC Zip Code 20004

1000.00									
---------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement

Room Rental

Category/ Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Helen Milby & Company

Transaction ID: D651

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	0	8

Mailing Address 12502 Brooke Lane

Amount of Each Disbursement this Period

City Upper Marlboro State MD Zip Code 20772

10000.00									
----------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement

Fundraising Consulting Services

Category/ Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Helen M. Milby

Transaction ID: D649

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	8

Mailing Address 12502 Brooke Lane

Amount of Each Disbursement this Period

City Upper Marlboro State MD Zip Code 20772

376.50									
--------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement

Reimbursement - Travel

Category/ Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

11376.50

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 12 / 16

<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)

New Democrat Coalition Political Action Committee AKA NDC PAC

A. Full Name (Last, First, Middle Initial) Matt Schumaker	Transaction ID: D667 Date of Disbursement																				
Mailing Address 2414 39th Street, NW	<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>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	6		2	0	0	8												
City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement - Meals	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>151.30</td> </tr> </table>																				151.30
									151.30												
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) ▼																				
B. Full Name (Last, First, Middle Initial) Democratic National Committee	Transaction ID: D647 Date of Disbursement																				
Mailing Address 430 South Capitol Street, SE	<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>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	4		2	0	0	8												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Room Rental	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>150.00</td> </tr> </table>																				150.00
									150.00												
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) ▼																				
C. Full Name (Last, First, Middle Initial) Democratic National Committee	Transaction ID: D648 Date of Disbursement																				
Mailing Address 430 South Capitol Street, SE	<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>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	4		2	0	0	8												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Room Rental	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>150.00</td> </tr> </table>																				150.00
									150.00												
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)

451.30

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 / 16

<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)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Chase Card Services

Mailing Address P.O. Box 15153

City
Wilmington

State
DE

Zip Code
19886

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D652

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1844.79

B.

Full Name (Last, First, Middle Initial)

Hyatt Regency Chesapeake Bay

Mailing Address 100 Heron Boulevard

City
Cambridge

State
MD

Zip Code
21613

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D654

Date of Disbursement

/ /

Amount of Each Disbursement this Period

36.68

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Bailek's Music

Mailing Address 932 Hungerford Drive
Number 3

City
Gaithersburg

State
MD

Zip Code
20878

Purpose of Disbursement
Entertainment for Event

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D655

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1844.79

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 / 16

<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)

New Democrat Coalition Political Action Committee AKA NDC PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address P.O. Box 15153</p> <p>City Wilmington State DE Zip Code 19886</p> <p>Purpose of Disbursement Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D666</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>36.46</div> </div> </p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Corner Bakery</p> <p>Mailing Address 529 14th Street, NW</p> <p>City Washington State DC Zip Code 20045</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D656</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>222.09</div> </div> </p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 1200 East Algonquin Road</p> <p>City Arlington Heights State IL Zip Code 60005</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D659</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>216.02</div> </div> </p> <p>[MEMO ITEM]</p>

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)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Amtrak

Mailing Address 50 Massachusetts Ave NE
Union Station

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D665

Date of Disbursement

05 / 19 / 2008

Amount of Each Disbursement this Period

272.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Breeze Away Luxury Shuttle Service

Mailing Address 421 Academy Street

City Cambridge State MD Zip Code 21613

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D653

Date of Disbursement

05 / 19 / 2008

Amount of Each Disbursement this Period

628.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

13672.59

**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 16 / 16

<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)

New Democrat Coalition Political Action Committee AKA NDC PAC

A.

Full Name (Last, First, Middle Initial)

Cazayoux For Congress

Mailing Address P.O. Box 156

City
New RoadsState
LAZip Code
70760Purpose of Disbursement
ContributionCandidate Name
Donald CazayouxCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 06

Transaction ID: D618

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	0	8

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Childers For Congress

Mailing Address P.O. Box 177

City
BoonevilleState
MSZip Code
38829Purpose of Disbursement
ContributionCandidate Name
Travis ChildersCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MS District: 01

Transaction ID: D616

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	0	8

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00