

**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

IMPACT

ADDRESS (number and street)

509 Madison Ave. Suite 1902

☐Check if different
than previously
reported. (ACC)

New York

NY

10022

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00348607

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

10

16

2008

through

11

24

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

David A. Barrett

Signature of Treasurer

Electronically Filed by David A. Barrett

Date

12

04

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
IMPACT

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		152123.20
(b) Cash on Hand at Beginning of Reporting Period	92854.41	
(c) Total Receipts (from Line 19)	98974.83	395231.06
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	191829.24	547354.26
7. Total Disbursements (from Line 31)	178150.86	533675.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13678.38	13678.38
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

IMPACT

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	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	42850.00	74200.00
(i) Itemized (use Schedule A)	450.00	1150.00
(ii) Unitemized	43300.00	75350.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	0.00	0.00
(b) Political Party Committees	55500.00	317535.00
(c) Other Political Committees (such as PACs)	98800.00	392885.00
(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)	60.00	153.06
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	114.83	2193.00
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))	98974.83	395231.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	98974.83	395231.06

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.....	20650.86	91175.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	20650.86	91175.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	147500.00	432500.00
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.....	10000.00	10000.00
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))..	178150.86	533675.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	178150.86	533675.88

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)	98800.00	392885.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	98800.00	392885.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20650.86	91175.88
37. Offsets to Operating Expenditures (from Line 15, page 3)	60.00	153.06
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20590.86	91022.82

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

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

FOR LINE NUMBER: PAGE 6 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Katherine Childress

Mailing Address 7131 Arlington Rd. #543

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: C5247950

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Victor H. Fazio

Mailing Address 1333 New Hampshire Ave. NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Akin Gump Strauss Hauer
& Feld LLP

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C39368

Amount of Each Receipt this Period

375.00

C.

Full Name (Last, First, Middle Initial)

Gudmundur Kjaernested

Mailing Address 332 Field Point Rd.

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

C

Name of Employer
TransAtlantic Lines LLC

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C39355

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

5975.00

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 7 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Lee H. Perlman

Mailing Address 10 Orsini Drive

City

Larchmont

State

NY

Zip Code

10538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greater New York Hospital
Association

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C39374

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Kenneth E. Raske

Mailing Address 555 West 57th St.

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greater New York Hospital
Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C39372

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

David C. Rich

Mailing Address 555 W. 57th St. Suite 1500

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greater New York Hospital
Association

Occupation

Senior VP-Goverment Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: C39373

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

5000.00

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 / 42

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

James S. Richman

Mailing Address 860 U.N. Plaza

City

New York

State

NY

Zip Code

10017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Richloom FabricsOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: C39328

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Dennis Riese

Mailing Address 587 Duck Pond Rd.

City

Matinecock

State

NY

Zip Code

11560

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Riese OrganizationOccupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C39363

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Randi Riese

Mailing Address 587 Duck Pond Rd.

City

Matinecock

State

NY

Zip Code

11560

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C39364

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 9 / 42

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Liz Robbins

Mailing Address c/o Liz Robbins Associates
441 New Jersey Ave. SECity State Zip Code
Washington DC 20003FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C39358

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Brandon C. Rose

Mailing Address 625 Mt. Hope Rd.

City State Zip Code
Wharton NJ 07885FEC ID number of contributing
federal political committee.

C

Name of Employer
TransAtlantic Lines LLCOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: C39356

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Thomas S. Smith, Jr.

Mailing Address 16 Oriole Ave.

City State Zip Code
Bronxville NY 10708FEC ID number of contributing
federal political committee.

C

Name of Employer
Reed Business InformationOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C39353

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

6600.00

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 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Leon Wagner

Mailing Address 8 Lincoln Woods

City

State

Zip Code

Purchase

NY

10577

FEC ID number of contributing
federal political committee.

C

Name of Employer
Golden Tree Asset Managem-
ent

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C39327

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Wole Adeoye

Mailing Address 2028 Ravina Park Rd.

City

State

Zip Code

Decatur

IL

62526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Victory Pharmacy

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39345

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

State

Zip Code

Alexandria

VA

22314

FEC ID number of contributing
federal political committee.

C

C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39345B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

5250.00

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 11 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Stephen Bernardi

Mailing Address 250 Grove St.

City

Framingham

State

MA

Zip Code

01701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Johnson Drug

Occupation
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39338

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

C00030809

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39338B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution
earmarked through this or-
ganization.

C.

Full Name (Last, First, Middle Initial)

John R. Carson

Mailing Address 4118 Mt. Laurel

City

San Antonio

State

TX

Zip Code

78240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carson Drug LLC

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39348

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

500.00

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 12 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39348B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Charles D. Cottrell

Mailing Address 114 Brooks Blvd.

City

Brewton

State

AL

Zip Code

36426

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical Center Pharmacy

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C39349

Amount of Each Receipt this Period

1000.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39349B

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

1000.00

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 13 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Delbert M. Cranford

Mailing Address 17941 South Highway 109

City

Denton

State

NC

Zip Code

27239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Yadkin Valley Pharmacy

Occupation
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39333

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

C00030809

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39333B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution
earmarked through this or-
ganization.

C.

Full Name (Last, First, Middle Initial)

Timothy A. Dittenhoefer

Mailing Address 12 Alexander Blvd.

City

Poughkeepsie

State

NY

Zip Code

12603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith Street Pharmacy

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39340

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

500.00

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 14 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39340B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Howard Feirman

Mailing Address 122 Linden Ave.

City

Lynbrook

State

NY

Zip Code

11563

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prescription Headquarters

Occupation

Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C39337

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39337B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

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 15 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Ira Freeman

Mailing Address 12660 Riverside Dr. Suite 100

City State Zip Code
Valley Village CA 91607

FEC ID number of contributing
federal political committee.

C

Name of Employer
Key Pharmacy

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39329

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39329B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution
earmarked through this or-
ganization.

C.

Full Name (Last, First, Middle Initial)

Robert Giaquinto

Mailing Address 19 Redfield St.

City State Zip Code
Rye NY 10580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: C39343

Amount of Each Receipt this Period

225.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

475.00

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 16 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.**C** C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39343B

Amount of Each Receipt this Period

225.00

[MEMO ITEM]Note: Above Contribution
earmarked through this or-
ganization.**B.**

Full Name (Last, First, Middle Initial)

Gary L. Haas

Mailing Address 5709 Red Hill Rd.

City

Keedysville

State

MD

Zip Code

21756

FEC ID number of contributing
federal political committee.**C**Name of Employer
Boonsboro Pharmacy

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39346

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below**C.**

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.**C** C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39346B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]Note: Above Contribution
earmarked through this or-
ganization.**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 17 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Richard L. Irby

Mailing Address 1513 Burmeister

City

Fort Worth

State

TX

Zip Code

76134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hallmark Pharmacy

Occupation
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: C39332

Amount of Each Receipt this Period

300.00

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

C00030809

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39332B

Amount of Each Receipt this Period

300.00

[MEMO ITEM]
Note: Above Contribution
earmarked through this or-
ganization.

C.

Full Name (Last, First, Middle Initial)

Carl P. Mudrick

Mailing Address 2011 Coyne St.

City

Honolulu

State

HI

Zip Code

96826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Corner Pharmacy

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39339

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

550.00

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 18 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39339B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Rita Perine

Mailing Address 51 W. Flint Hills Dr.

City

Alma

State

KS

Zip Code

66401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Doug's Pharmacy

Occupation

Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C393336

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39336B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

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 19 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

John J. Riehl

Mailing Address 11 Wilson Dr.

City

Holland

State

PA

Zip Code

18966

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ring's Drugs

Occupation
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39342

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

C00030809

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39342B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution
earmarked through this or-
ganization.

C.

Full Name (Last, First, Middle Initial)

John A. Staszal

Mailing Address 16251 Main St.

City

Guerneville

State

CA

Zip Code

95446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lark Drugs

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39344

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

500.00

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 20 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39344B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Robert B. Story

Mailing Address 109 South Lake Ave.

City

Pahokee

State

FL

Zip Code

33476

FEC ID number of contributing
federal political committee.

C

Name of Employer
Glades Drug

Occupation

Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C39334

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39334B

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

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 21 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

John V. Tonjuk

Mailing Address 3802 San Poppi Ct.

City

Ozark

State

MO

Zip Code

65721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marionville Pharmacy

Occupation
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C39347

Amount of Each Receipt this Period

500.00

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)

National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

C00030809

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

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

Transaction ID: C39347B

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

42850.00

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

FOR LINE NUMBER: PAGE 22 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

AFSCME-PEOPLE

Mailing Address 1625 L Street, N.W.

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.**C** C00011114

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
1	0		3	1		2	0	0	8

Transaction ID: C39376

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

American College of Cardiology PAC

Mailing Address 2400 N St. NW

City

Washington

State

DC

Zip Code

20037

FEC ID number of contributing
federal political committee.**C** C00375360

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
1	0		3	0		2	0	0	8

Transaction ID: C39369

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

American Federation of Teachers -COPE

Mailing Address 555 New Jersey Ave., NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.**C** C00028860

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
1	0		2	3		2	0	0	8

Transaction ID: C39351

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 23 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Build PAC of the National Association of Home Buil

Mailing Address 1201 15th St. NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00000901

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
1 0 / 2 3 / 2 0 0 8

Transaction ID: C39352

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Cisco Systems E-PAC

Mailing Address 20 Park Rd. Suite E

City

Burlingame

State

CA

Zip Code

94010

FEC ID number of contributing
federal political committee.

C C00362707

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
1 0 / 3 1 / 2 0 0 8

Transaction ID: C39378

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Democratic Republican Independent Voter Education

Mailing Address 25 Louisiana Avenue, N.W.

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00032979

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
1 0 / 3 0 / 2 0 0 8

Transaction ID: C39367

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 24 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

General Electric PAC

Mailing Address 1299 Penn Ave. NW
Suite 1100

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: C39354

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Greenberg Traurig, P.A. PAC

Mailing Address 1221 Brickell Ave.

City State Zip Code
Miami FL 33131

FEC ID number of contributing
federal political committee.

C C00266585

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
1 0 / 2 8 / 2 0 0 8

Transaction ID: C39365

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Holland & Knight Committee for Effective Governmen

Mailing Address 2099 Pennsylvania Ave., NW
Suite 100

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00171330

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Transaction ID: C5328356

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)

6000.00

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 25 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)
Massachusetts Mutual Life Insurance PAC

Mailing Address 1295 State St.

City State Zip Code
Springfield MA 01111

FEC ID number of contributing
federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: C39379

Amount of Each Receipt this Period

3000.00

B.

Full Name (Last, First, Middle Initial)
Office of the Commissioner of Major League Baseball

Mailing Address 1050 Connecticut Ave., NW #1100

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee. **C** C00368142

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
1 1 / 2 0 / 2 0 0 8

Transaction ID: C5328358

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Pepsi-Cola Bottlers Association Inc.-PCBA PAC

Mailing Address 99 Trophy Club Dr.

City State Zip Code
Trophy Club TX 76262

FEC ID number of contributing
federal political committee. **C** C00122671

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: C5312688

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

6500.00

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 26 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

SAKS Inc. Fund for Retail Growth PAC

Mailing Address 750 Lakeshore Parkway

City

Birmingham

State

AL

Zip Code

35211

FEC ID number of contributing
federal political committee.

C C00332965

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
1 0 / 2 9 / 2 0 0 8

Transaction ID: C39370

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Sonnenschein PAC

Mailing Address 1301 K St. NW
Suite 600 East Tower

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00216127

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
1 0 / 3 1 / 2 0 0 8

Transaction ID: C39377

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Trucking PAC of the American Trucking Associations

Mailing Address 430 First St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C C00002881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: C39375

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

55500.00

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

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

FOR LINE NUMBER: PAGE 27 / 42

(check only one)

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

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NAME OF COMMITTEE (In Full)

IMPACT

A.

Full Name (Last, First, Middle Initial)

Citizens Bank

Mailing Address 720 South Main Street

City

Sharon

State

MA

Zip Code

02067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2193.00

Date of Receipt

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

Transaction ID: C5322228

Amount of Each Receipt this Period

114.83

* Interest

SUBTOTAL of Receipts This Page (optional)

114.83

TOTAL This Period (last page this line number only)

114.83

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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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A.

Full Name (Last, First, Middle Initial)
509 Madison Avenue Associates, LP

Mailing Address c/o Kensico Properties
509 Madison Ave.

City New York State NY Zip Code 10022

Purpose of Disbursement
Rent (includes utilities)

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D272076

Date of Disbursement

11 / 01 / 2008

Amount of Each Disbursement this Period

330.47

B.

Full Name (Last, First, Middle Initial)
Kelly Glynn

Mailing Address 226 East 70th St.
Apt. 4-H

City New York State NY Zip Code 10021

Purpose of Disbursement
Consulting Services-Fundraising

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D272077

Date of Disbursement

11 / 01 / 2008

Amount of Each Disbursement this Period

500.00

Not for Federal Candidate

C.

Full Name (Last, First, Middle Initial)
Kelly Glynn

Mailing Address 226 East 70th St.
Apt. 4-H

City New York State NY Zip Code 10021

Purpose of Disbursement
Consulting Services-Fundraising

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D272071

Date of Disbursement

11 / 19 / 2008

Amount of Each Disbursement this Period

10000.00

Not for Federal Candidate

SUBTOTAL of Disbursements This Page (optional)

10830.47

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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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A. Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D6562 Date of Disbursement																				
Mailing Address 5039 Connecticut Ave., NW Suite 1A	<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>1</td><td>0</td><td></td><td>2</td><td>1</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	1	0		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	1		2	0	0	8												
City Washington State DC Zip Code 20008	Amount of Each Disbursement this Period																				
Purpose of Disbursement Software Candidate Name	<table border="1"> <tr> <td colspan="10">1100.00</td> </tr> </table>	1100.00																			
1100.00																					
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Brad Thompson	Transaction ID: D272072 Date of Disbursement																				
Mailing Address c/o IMPACT 509 Madison Ave., Ste. 1902	<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>1</td><td>1</td><td></td><td>1</td><td>9</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	1	1		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	8												
City New York State NY Zip Code 10022	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting Services-Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Brad Thompson	Transaction ID: D272078 Date of Disbursement																				
Mailing Address c/o IMPACT 509 Madison Ave., Ste. 1902	<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>1</td><td>1</td><td></td><td>0</td><td>1</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	1	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	0	8												
City New York State NY Zip Code 10022	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting Services-Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7100.00

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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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A.

Full Name (Last, First, Middle Initial)

Verdolino & Lowey, P.C.

Mailing Address 124 Washington St.
Suite 101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement
Professional Services-Accounting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D6558

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

1016.97

B.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D6560

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

49.91

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 2853

City New York State NY Zip Code 10116

Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D6575

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

1473.17

SUBTOTAL of Disbursements This Page (optional)

2540.05

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A. Full Name (Last, First, Middle Initial) Aramark Mailing Address 50 Rt. 120	Transaction ID: D6576 Date of Disbursement 10 31 2008
City East Rutherford State NJ Zip Code 07073 Purpose of Disbursement Reception-Catering Not for Fed Candidate Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Amount of Each Disbursement this Period 1228.04 [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Aramark Mailing Address 50 Rt. 120 City East Rutherford State NJ Zip Code 07073 Purpose of Disbursement Reception-Catering Not for Fed Candidate Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: D6580 Date of Disbursement 10 31 2008 Amount of Each Disbursement this Period 199.60 [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) UPS Store Mailing Address 208 East 51st St. City New York State NY Zip Code 10022 Purpose of Disbursement Postage Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: D6577 Date of Disbursement 10 31 2008 Amount of Each Disbursement this Period 15.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

20470.52

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A. Full Name (Last, First, Middle Initial) Citizens for Colleen Callahan	Transaction ID: D6559 Date of Disbursement
Mailing Address PO Box 9458	M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8
City Peoria State IL Zip Code 61612	Amount of Each Disbursement this Period
Purpose of Disbursement 2008 IL-H-18-General	2500.00
Candidate Name Colleen Callahan	011 Category/Type
Office Sought: ☒ House ☐ Senate ☐ President State: IL District: 18	Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dan 10	Transaction ID: D6591 Date of Disbursement
Mailing Address 1088 Bishop St. Suite 1009	M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 8
City Honolulu State HI Zip Code 96813	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 HI-S--Primary	5000.00
Candidate Name Daniel K. Inouye	011 Category/Type
Office Sought: ☐ House ☒ Senate ☐ President State: HI District:	Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Dan 10	Transaction ID: D6592 Date of Disbursement
Mailing Address 1088 Bishop St. Suite 1009	M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 8
City Honolulu State HI Zip Code 96813	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 HI-S--General	5000.00
Candidate Name Daniel K. Inouye	011 Category/Type
Office Sought: ☐ House ☒ Senate ☐ President State: HI District:	Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

12500.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A. Full Name (Last, First, Middle Initial) Evan Bayh Committee	Transaction ID: D6581 Date of Disbursement
Mailing Address PO Box 441749	M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 8
City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 IN-S--Primary	5000.00
Candidate Name Evan Bayh	011 Category/Type
Office Sought: ☐ House ☒ Senate ☐ President State: IN District:	Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Evan Bayh Committee	Transaction ID: D6582 Date of Disbursement
Mailing Address PO Box 441749	M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 8
City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 IN-S--General	5000.00
Candidate Name Evan Bayh	011 Category/Type
Office Sought: ☐ House ☒ Senate ☐ President State: IN District:	Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Feingold Senate Committee	Transaction ID: D6589 Date of Disbursement
Mailing Address PO Box 620062	M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 8
City Middleton State WI Zip Code 53562	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 WI-S--Primary	5000.00
Candidate Name Russell D. Feingold	011 Category/Type
Office Sought: ☐ House ☒ Senate ☐ President State: WI District:	Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

15000.00

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 PageFOR LINE NUMBER:
(check only one)

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A. Full Name (Last, First, Middle Initial) Feingold Senate Committee	Transaction ID: D6590 Date of Disbursement																				
Mailing Address PO Box 620062	<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>1</td><td>1</td><td></td><td>0</td><td>3</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	1	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	0	8												
City Middleton State WI Zip Code 53562	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 WI-S--General	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Russell D. Feingold	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: ☐ House ☒ Senate ☐ President State: WI District:	Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Friends for Harry Reid	Transaction ID: D6601 Date of Disbursement																				
Mailing Address PO Box 19163	<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>1</td><td>1</td><td></td><td>0</td><td>3</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	1	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	0	8												
City Las Vegas State NV Zip Code 89132	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 NV-S--Primary	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Harry Reid	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: ☐ House ☒ Senate ☐ President State: NV District:	Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Friends for Harry Reid	Transaction ID: D6602 Date of Disbursement																				
Mailing Address PO Box 19163	<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>1</td><td>1</td><td></td><td>0</td><td>3</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	1	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	0	8												
City Las Vegas State NV Zip Code 89132	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 NV-S--General	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Harry Reid	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: ☐ House ☒ Senate ☐ President State: NV District:	Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

15000.00

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 PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
IMPACT

A. Full Name (Last, First, Middle Initial) Friends of Barbara Boxer Mailing Address PO Box 641751	Transaction ID: D6583 Date of Disbursement 11 03 2008
City Los Angeles State CA Zip Code 90064 Purpose of Disbursement 2010 CA-S--Primary Candidate Name Barbara Boxer Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ State: CA District:	Amount of Each Disbursement this Period 5000.00 011 Category/ Type
B. Full Name (Last, First, Middle Initial) Friends of Barbara Boxer Mailing Address PO Box 641751 City Los Angeles State CA Zip Code 90064 Purpose of Disbursement 2010 CA-S--General Candidate Name Barbara Boxer Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼ State: CA District:	Transaction ID: D6584 Date of Disbursement 11 03 2008 Amount of Each Disbursement this Period 5000.00 011 Category/ Type
C. Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln Mailing Address PO Box 3197 City Little Rock State AR Zip Code 72203 Purpose of Disbursement 2010 AR-S--Primary Candidate Name Blanche L. Lincoln Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ State: AR District:	Transaction ID: D6595 Date of Disbursement 11 03 2008 Amount of Each Disbursement this Period 5000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)

15000.00

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:
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NAME OF COMMITTEE (In Full)
 IMPACT

A.

Full Name (Last, First, Middle Initial)
 Friends of Blanche Lincoln

Mailing Address PO Box 3197

City Little Rock State AR Zip Code 72203

Purpose of Disbursement
 2010 AR-S--General

Candidate Name
 Blanche L. Lincoln

011
 Category/
 Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District:

Transaction ID: D6596

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
 Friends of Byron Dorgan

Mailing Address PO Box 871

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
 2010 ND-S--Primary

Candidate Name
 Byron L. Dorgan

011
 Category/
 Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District:

Transaction ID: D6587

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
 Friends of Byron Dorgan

Mailing Address PO Box 871

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
 2010 ND-S--General

Candidate Name
 Byron L. Dorgan

011
 Category/
 Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: ND District:

Transaction ID: D6588

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
 IMPACT

A. Full Name (Last, First, Middle Initial) Friends of Chris Dodd Mailing Address PO Box 270701	Transaction ID: D6585 Date of Disbursement 11 03 2008
City West Hartford State CT Zip Code 06127 Purpose of Disbursement 2010 CT-S--Primary Candidate Name Christopher J. Dodd Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ State: CT District:	Amount of Each Disbursement this Period 5000.00 011 Category/ Type
B. Full Name (Last, First, Middle Initial) Friends of Chris Dodd Mailing Address PO Box 270701 City West Hartford State CT Zip Code 06127 Purpose of Disbursement 2010 CT-S--General Candidate Name Christopher J. Dodd Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼ State: CT District:	Transaction ID: D6586 Date of Disbursement 11 03 2008 Amount of Each Disbursement this Period 5000.00 011 Category/ Type
C. Full Name (Last, First, Middle Initial) Leahy for US Senate Committee Mailing Address PO Box 1042 City Montpelier State VT Zip Code 05601 Purpose of Disbursement 2010 VT-S--Primary Candidate Name Patrick Leahy Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ State: VT District:	Transaction ID: D6593 Date of Disbursement 11 03 2008 Amount of Each Disbursement this Period 5000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT**A.** Full Name (Last, First, Middle Initial)
Leahy for US Senate Committee

Mailing Address PO Box 1042

City Montpelier State VT Zip Code 05601

Purpose of Disbursement
2010 VT-S--GeneralCandidate Name
Patrick Leahy011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ President
State: VT District:Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D6594

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
Martin for Senate Inc.

Mailing Address P.O. Box 7219

City Atlanta State GA Zip Code 30357

Purpose of Disbursement
2008 GA-S--RunoffCandidate Name
James F. Martin011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ President
State: GA District:Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼
Runoff

Transaction ID: D272075

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Massa for CongressMailing Address 59 East Market St.
Suite 244

City Corning State NY Zip Code 14830

Purpose of Disbursement
2008 NY-H-29-GeneralCandidate Name
Eric J. Massa011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NY District: 29Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D6574

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

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
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NAME OF COMMITTEE (In Full)
IMPACT

A.

Full Name (Last, First, Middle Initial)
Mikulski for Senate Committee

Mailing Address PO Box 13147

City Baltimore State MD Zip Code 21203

Purpose of Disbursement
2010 MD-S--Primary

Candidate Name
Barbara Mikulski

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District:

Transaction ID: D6597

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Mikulski for Senate Committee

Mailing Address PO Box 13147

City Baltimore State MD Zip Code 21203

Purpose of Disbursement
2010 MD-S--General

Candidate Name
Barbara Mikulski

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District:

Transaction ID: D6598

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Nevada State Democratic Party

Mailing Address 409 Horn St.

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement
Contribution

Candidate Name
Nevada State Democratic Party

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D6563

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

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
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NAME OF COMMITTEE (In Full)
IMPACT

A. Full Name (Last, First, Middle Initial) People for Patty Murray US Senate Campaign	Transaction ID: D6599
Mailing Address PO Box 3662	Date of Disbursement
	MM / DD / YYYY 11 / 03 / 2008
City State Zip Code Seattle WA 98124	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 WA-S--Primary	5000.00
Candidate Name Patty Murray	011 Category/ Type
Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ State: WA District:	
B. Full Name (Last, First, Middle Initial) People for Patty Murray US Senate Campaign	Transaction ID: D6600
Mailing Address PO Box 3662	Date of Disbursement
	MM / DD / YYYY 11 / 03 / 2008
City State Zip Code Seattle WA 98124	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 WA-S--General	5000.00
Candidate Name Patty Murray	011 Category/ Type
Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼ State: WA District:	
C. Full Name (Last, First, Middle Initial) Salazar for Senate	Transaction ID: D6603
Mailing Address PO Box 600	Date of Disbursement
	MM / DD / YYYY 11 / 03 / 2008
City State Zip Code Denver CO 80201	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 CO-S--Primary	5000.00
Candidate Name Ken Salazar	011 Category/ Type
Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ State: CO District:	
SUBTOTAL of Disbursements This Page (optional) ►	15000.00
TOTAL This Period (last page this line number only) ►	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A.	Full Name (Last, First, Middle Initial) Salazar for Senate Mailing Address PO Box 600 <table> <tr> <td>City Denver</td> <td>State CO</td> <td>Zip Code 80201</td> </tr> </table> <table> <tr> <td>Purpose of Disbursement 2010 CO-S--General</td> <td> 011 Category/ Type</td> </tr> </table> <table> <tr> <td>Office Sought: ☐ House ☒ Senate ☐ President</td> <td>Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼</td> </tr> </table> State: CO District:	City Denver	State CO	Zip Code 80201	Purpose of Disbursement 2010 CO-S--General	011 Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President	Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼	Transaction ID: D6604 Date of Disbursement <table> <tr> <td> 1 ^M</td> <td> 1 ^M</td> <td>/</td> <td> 0 ^D</td> <td> 3 ^D</td> <td>/</td> <td> 2 ^Y</td> <td> 0 ^Y</td> <td> 0 ^Y</td> <td> 8 ^Y</td> </tr> </table> Amount of Each Disbursement this Period <table> <tr> <td> 5000.00 </td> </tr> </table>	1 ^M	1 ^M	/	0 ^D	3 ^D	/	2 ^Y	0 ^Y	0 ^Y	8 ^Y	5000.00
City Denver	State CO	Zip Code 80201																		
Purpose of Disbursement 2010 CO-S--General	011 Category/ Type																			
Office Sought: ☐ House ☒ Senate ☐ President	Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼																			
1 ^M	1 ^M	/	0 ^D	3 ^D	/	2 ^Y	0 ^Y	0 ^Y	8 ^Y											
5000.00																				
B.	Full Name (Last, First, Middle Initial) Wyden for Senate Mailing Address PO Box 3498 <table> <tr> <td>City Portland</td> <td>State OR</td> <td>Zip Code 97208</td> </tr> </table> <table> <tr> <td>Purpose of Disbursement 2010 OR-S--Primary</td> <td> 011 Category/ Type</td> </tr> </table> <table> <tr> <td>Office Sought: ☐ House ☒ Senate ☐ President</td> <td>Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼</td> </tr> </table> State: OR District:	City Portland	State OR	Zip Code 97208	Purpose of Disbursement 2010 OR-S--Primary	011 Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President	Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: D6605 Date of Disbursement <table> <tr> <td> 1 ^M</td> <td> 1 ^M</td> <td>/</td> <td> 0 ^D</td> <td> 3 ^D</td> <td>/</td> <td> 2 ^Y</td> <td> 0 ^Y</td> <td> 0 ^Y</td> <td> 8 ^Y</td> </tr> </table> Amount of Each Disbursement this Period <table> <tr> <td> 5000.00 </td> </tr> </table>	1 ^M	1 ^M	/	0 ^D	3 ^D	/	2 ^Y	0 ^Y	0 ^Y	8 ^Y	5000.00
City Portland	State OR	Zip Code 97208																		
Purpose of Disbursement 2010 OR-S--Primary	011 Category/ Type																			
Office Sought: ☐ House ☒ Senate ☐ President	Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼																			
1 ^M	1 ^M	/	0 ^D	3 ^D	/	2 ^Y	0 ^Y	0 ^Y	8 ^Y											
5000.00																				
C.	Full Name (Last, First, Middle Initial) Wyden for Senate Mailing Address PO Box 3498 <table> <tr> <td>City Portland</td> <td>State OR</td> <td>Zip Code 97208</td> </tr> </table> <table> <tr> <td>Purpose of Disbursement 2010 OR-S--General</td> <td> 011 Category/ Type</td> </tr> </table> <table> <tr> <td>Office Sought: ☐ House ☒ Senate ☐ President</td> <td>Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼</td> </tr> </table> State: OR District:	City Portland	State OR	Zip Code 97208	Purpose of Disbursement 2010 OR-S--General	011 Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President	Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼	Transaction ID: D6606 Date of Disbursement <table> <tr> <td> 1 ^M</td> <td> 1 ^M</td> <td>/</td> <td> 0 ^D</td> <td> 3 ^D</td> <td>/</td> <td> 2 ^Y</td> <td> 0 ^Y</td> <td> 0 ^Y</td> <td> 8 ^Y</td> </tr> </table> Amount of Each Disbursement this Period <table> <tr> <td> 5000.00 </td> </tr> </table>	1 ^M	1 ^M	/	0 ^D	3 ^D	/	2 ^Y	0 ^Y	0 ^Y	8 ^Y	5000.00
City Portland	State OR	Zip Code 97208																		
Purpose of Disbursement 2010 OR-S--General	011 Category/ Type																			
Office Sought: ☐ House ☒ Senate ☐ President	Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼																			
1 ^M	1 ^M	/	0 ^D	3 ^D	/	2 ^Y	0 ^Y	0 ^Y	8 ^Y											
5000.00																				
SUBTOTAL of Disbursements This Page (optional) ►		<table> <tr> <td> 15000.00 </td> </tr> </table>	15000.00																	
15000.00																				
TOTAL This Period (last page this line number only) ►		<table> <tr> <td> 147500.00 </td> </tr> </table>	147500.00																	
147500.00																				

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)

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☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A.

Full Name (Last, First, Middle Initial)
Franken Recount Fund

Mailing Address 2575 University Ave. West #100

City State Zip Code
Saint Paul MN 55114

Purpose of Disbursement
Recount Donation

Candidate Name
Franken Recount Fund

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

Transaction ID: D272074

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00