

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 263

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

<b>1. NAME OF COMMITTEE (in full)</b> Hillary Clinton for President		<b>2. IDENTIFICATION NUMBER</b> C00431569
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 1825 K Street Suite 1000		
<b>CITY, STATE, and ZIP CODE</b> Washington                      DC                                      20006		<b>3. IS THIS REPORT FOR :</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General

**4. TYPE OF REPORT** (Check here  if this is a Termination Report.)

April 15 Quarterly Report                       February 20                       June 20                       October 20  
 July 15 Quarterly Report                       March 20                       July 20                       November 20  
 October 15 Quarterly Report                       April 20                       August 20                       December 20  
 January 31 Year End Report                       May 20                       September 20                       January 31

Twelfth day report preceding \_\_\_\_\_  
(Type of Election)  
 election on 11/04/2008 in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_  
 on \_\_\_\_\_

IS THIS REPORT AN AMENDMENT       YES       NO

5. COVERING PERIOD	FROM 07/01/2009	THROUGH 09/30/2009
<b>SUMMARY</b>	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD .....	2548805.46
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) .....	206600.14
	8. SUBTOTAL (Lines 6 and 7) .....	2755405.60
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	772863.36
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) .....	1982542.24
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	0.00
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	995500.00
	13. EXPENDITURES SUBJECT TO LIMITATION .....	0.00
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	2507140.95
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) .....	5320938.43

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 <b>Shelly Moskwa</b>	Date 10/15/2009
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

**For further information contact:** Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**FEC FORM 3P**  
**(01/2001)**

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3P)

Name of committee (in full) <b>Hillary Clinton for President</b>	Report Covering the Period	
	From: 07/01/2009	To: 09/30/2009
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :		
(a) Individuals/Persons Other Than Political Committees .....	6803.38	2961873.71
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees .....	2500.00	63250.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	9303.38	3025123.71
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate .....	0.00	0.00
(b) Other Loans .....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :		
(a) Operating .....	25644.76	2837321.53
(b) Fundraising .....	0.00	0.00
(c) Legal and Accounting .....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	25644.76	2837321.53
21. OTHER RECEIPTS (Dividend, Interest, etc.) .....	171652.00	3408235.50
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) .....	206600.14	9270680.74
<b>II. DISBURSEMENTS</b>		
23. OPERATING EXPENDITURES .....	773824.44	8042044.96
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS .....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS .....	0.00	0.00
27. LOAN REPAYMENTS MADE :		
(a) Repayment of Loans made or Guaranteed by Candidate .....	0.00	0.00
(b) Other Repayments .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) .....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :		
(a) Individuals/Persons Other Than Political Committees .....	-961.08	251907.64
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees .....	0.00	9592.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) .....	-961.08	261499.64
29. OTHER DISBURSEMENTS .....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	772863.36	8303544.60
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>		
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 263**  
(Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)

(PAGE 3, FEC FORM 3P)

**1. NAME OF COMMITTEE (in full)**

Hillary Clinton for President

**ADDRESS (number and street)**1825 K Street  
Suite 1000**CITY, STATE, and ZIP CODE**

Washington DC 20006

**2. IDENTIFICATION NUMBER**

C00431569

**ALLOCATION BY STATE**

<b>STATE</b>	<b>ALLOCATION THIS PERIOD</b>	<b>TOTAL ALLOCATION TO DATE</b>	<b>STATE</b>	<b>ALLOCATION THIS PERIOD</b>	<b>TOTAL ALLOCATION TO DATE</b>
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Maria Annunziata	Date of Receipt MM / DD / YYYY 08 / 26 / 2009
	Mailing Address 85 Scodon Dr	Amount of Each Receipt this Period 10.00
	City State Zip Code Ridgefield CT 06877-1319	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952307
	Name of Employer National Realty & Dev. C	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 790.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Maria Annunziata	Date of Receipt MM / DD / YYYY 09 / 26 / 2009
	Mailing Address 85 Scodon Dr	Amount of Each Receipt this Period 10.00
	City State Zip Code Ridgefield CT 06877-1319	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952357
	Name of Employer National Realty & Dev. C	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 790.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Maria Annunziata	Date of Receipt MM / DD / YYYY 07 / 26 / 2009
	Mailing Address 85 Scodon Dr	Amount of Each Receipt this Period 10.00
	City State Zip Code Ridgefield CT 06877-1319	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952189
	Name of Employer National Realty & Dev. C	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 790.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	30.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 263
	(check only one)
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b
<input type="checkbox"/> 17b 20a	<input type="checkbox"/> 17c 20b
<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Geoffrey Arend	Date of Receipt MM / DD / YYYY 09 / 19 / 2009
	Mailing Address 8058 192nd St	Amount of Each Receipt this Period 100.00
	City State Zip Code Hollis NY 11423-1043	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952338
	Name of Employer Occupation Aircargonewws Editor/Publisher	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1286.97	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Ascenzi	Date of Receipt MM / DD / YYYY 07 / 05 / 2009
	Mailing Address 2970 Espy Ave	Amount of Each Receipt this Period 25.00
	City State Zip Code Pittsburgh PA 15216-2017	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952156
	Name of Employer Occupation Emerson Engineer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 825.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Ascenzi	Date of Receipt MM / DD / YYYY 07 / 21 / 2009
	Mailing Address 2970 Espy Ave	Amount of Each Receipt this Period 25.00
	City State Zip Code Pittsburgh PA 15216-2017	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952213
	Name of Employer Occupation Emerson Engineer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 825.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Ascenzi	Date of Receipt MM / DD / YYYY 08 / 03 / 2009
	Mailing Address 2970 Espy Ave	Amount of Each Receipt this Period 25.00
	City State Zip Code Pittsburgh PA 15216-2017	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Emerson Engineer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 825.00	Transaction ID: 1952266

<b>B.</b>	Full Name (Last, First, Middle Initial) Simone Best	Date of Receipt MM / DD / YYYY 07 / 27 / 2009
	Mailing Address 6716 Melba Ave	Amount of Each Receipt this Period 25.00
	City State Zip Code West Hills CA 91307-3411	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Community Clinic Association of Los Angeles Administrator	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1060.38	Transaction ID: 1952201

<b>C.</b>	Full Name (Last, First, Middle Initial) Adrienne Black	Date of Receipt MM / DD / YYYY 09 / 24 / 2009
	Mailing Address 12257 Silva Pl	Amount of Each Receipt this Period 25.00
	City State Zip Code Cerritos CA 90703-7651	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Ppla Healthcare Administrator	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 565.00	Transaction ID: 1952346

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 263</span>
	(check only one)
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b
<input type="checkbox"/> 17b <input type="checkbox"/> 20a	<input type="checkbox"/> 17c <input type="checkbox"/> 20b
<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Adrienne Black		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9	
Mailing Address 12257 Silva Pl		Amount of Each Receipt this Period 25.00	
City Cerritos	State CA	Zip Code 90703-7651	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 565.00	
Name of Employer Ppla	Occupation Healthcare Administrator		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 565.00		
		<b>Transaction ID:</b> 1952242	

<b>B.</b> Full Name (Last, First, Middle Initial) Adrienne Black		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9	
Mailing Address 12257 Silva Pl		Amount of Each Receipt this Period 25.00	
City Cerritos	State CA	Zip Code 90703-7651	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 565.00	
Name of Employer Ppla	Occupation Healthcare Administrator		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 565.00		
		<b>Transaction ID:</b> 1952219	

<b>C.</b> Full Name (Last, First, Middle Initial) Paul Brandfass		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9	
Mailing Address 4439 Bryan Ave		Amount of Each Receipt this Period 25.00	
City Kissimmee	State FL	Zip Code 34746-4221	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1337.49	
Name of Employer Island One Resorts	Occupation Security Supervisor		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1337.49		
		<b>Transaction ID:</b> 1952317	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	75.00

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Ellen Brown	Date of Receipt MM / DD / YYYY 07 / 26 / 2009
	Mailing Address 348 Cranbrook Dr	Amount of Each Receipt this Period 25.00
	City State Zip Code Woodway TX 76712-3921	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Baylor University Archivist	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: 1952186

<b>B.</b>	Full Name (Last, First, Middle Initial) Ellen Brown	Date of Receipt MM / DD / YYYY 08 / 26 / 2009
	Mailing Address 348 Cranbrook Dr	Amount of Each Receipt this Period 25.00
	City State Zip Code Woodway TX 76712-3921	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Baylor University Archivist	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: 1952305

<b>C.</b>	Full Name (Last, First, Middle Initial) Ellen Brown	Date of Receipt MM / DD / YYYY 09 / 26 / 2009
	Mailing Address 348 Cranbrook Dr	Amount of Each Receipt this Period 25.00
	City State Zip Code Woodway TX 76712-3921	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Baylor University Archivist	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: 1952354

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Pamela Cicetti	Date of Receipt MM / DD / YYYY 08 / 31 / 2009
	Mailing Address 201 Dreams Landing Way	Amount of Each Receipt this Period 500.00
	City State Zip Code Annapolis MD 21401-1013	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation George Washington University Writer/Editor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: 1952287

<b>B.</b>	Full Name (Last, First, Middle Initial) Josephine Conteh	Date of Receipt MM / DD / YYYY 07 / 18 / 2009
	Mailing Address 11 Seek Ct	Amount of Each Receipt this Period 25.00
	City State Zip Code Silver Spring MD 20912-7233	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Computer Sciences Corp Administrative Assistant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 285.00	Transaction ID: 1952168

<b>C.</b>	Full Name (Last, First, Middle Initial) Melvin Bette Cooperman	Date of Receipt MM / DD / YYYY 08 / 25 / 2009
	Mailing Address 190 Pond View Dr	Amount of Each Receipt this Period 20.00
	City State Zip Code Port Washington NY 11050-2468	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Not employed Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 570.00	Transaction ID: 1952298

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	545.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Melvin Bette Cooperman	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 9
	Mailing Address 190 Pond View Dr	Amount of Each Receipt this Period 20.00
	City State Zip Code Port Washington NY 11050-2468	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Not employed Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 570.00	Transaction ID: 1952350

<b>B.</b>	Full Name (Last, First, Middle Initial) Melvin Bette Cooperman	Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 5 / 2 0 0 9
	Mailing Address 190 Pond View Dr	Amount of Each Receipt this Period 20.00
	City State Zip Code Port Washington NY 11050-2468	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Not employed Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 570.00	Transaction ID: 1952204

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Effie K Datson	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 1 / 2 0 0 9
	Mailing Address Info Requested	Amount of Each Receipt this Period 250.00
	City State Zip Code Hagerstown MD 21740	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Info Requested Info Requested	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Transaction ID: 1952369

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	290.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrea Digiorgio		Date of Receipt
	Mailing Address 444 Nahua St Apt 805		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 26 / 2009
	City	State	Zip Code
	Honolulu	HI	96815-2974
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00
Name of Employer Standard Register		Occupation Sales - Acct Rep	Transaction ID: 1952190
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 887.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Andrea Digiorgio		Date of Receipt
	Mailing Address 444 Nahua St Apt 805		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 26 / 2009
	City	State	Zip Code
	Honolulu	HI	96815-2974
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00
Name of Employer Standard Register		Occupation Sales - Acct Rep	Transaction ID: 1952308
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 887.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Andrea Digiorgio		Date of Receipt
	Mailing Address 444 Nahua St Apt 805		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2009
	City	State	Zip Code
	Honolulu	HI	96815-2974
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00
Name of Employer Standard Register		Occupation Sales - Acct Rep	Transaction ID: 1952356
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 887.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 263

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Faye Downing		Date of Receipt M M / D D / Y Y Y Y Y 07 / 27 / 2009	
Mailing Address 7518 Whistlevale Dr SW		Amount of Each Receipt this Period 25.00	
City Byron Center	State MI	Zip Code 49315-9074	
FEC ID number of contributing federal political committee.		Transaction ID: 1952198	
Name of Employer Macys	Occupation Sales		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1150.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Faye Downing		Date of Receipt M M / D D / Y Y Y Y Y 08 / 27 / 2009	
Mailing Address 7518 Whistlevale Dr SW		Amount of Each Receipt this Period 25.00	
City Byron Center	State MI	Zip Code 49315-9074	
FEC ID number of contributing federal political committee.		Transaction ID: 1952289	
Name of Employer Macys	Occupation Sales		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1150.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Faye Downing		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2009	
Mailing Address 7518 Whistlevale Dr SW		Amount of Each Receipt this Period 25.00	
City Byron Center	State MI	Zip Code 49315-9074	
FEC ID number of contributing federal political committee.		Transaction ID: 1952362	
Name of Employer Macys	Occupation Sales		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1150.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Joan Dworetzky	Date of Receipt MM / DD / YYYY 07 / 10 / 2009
	Mailing Address 21 E 87th St	Amount of Each Receipt this Period 15.00
	City State Zip Code New York NY 10128-0506	
	FEC ID number of contributing federal political committee.	
	Name of Employer City of New York Occupation Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 315.00	<b>Transaction ID:</b> 1952166

<b>B.</b>	Full Name (Last, First, Middle Initial) Joan Dworetzky	Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 21 E 87th St	Amount of Each Receipt this Period 15.00
	City State Zip Code New York NY 10128-0506	
	FEC ID number of contributing federal political committee.	
	Name of Employer City of New York Occupation Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 315.00	<b>Transaction ID:</b> 1952273

<b>C.</b>	Full Name (Last, First, Middle Initial) Joan Dworetzky	Date of Receipt MM / DD / YYYY 09 / 10 / 2009
	Mailing Address 21 E 87th St	Amount of Each Receipt this Period 15.00
	City State Zip Code New York NY 10128-0506	
	FEC ID number of contributing federal political committee.	
	Name of Employer City of New York Occupation Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 315.00	<b>Transaction ID:</b> 1952318

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	45.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Matthew Eisemann	Date of Receipt MM / DD / YYYY 07 / 08 / 2009
	Mailing Address 440 E Cornell Dr Unit 6	Amount of Each Receipt this Period 50.00
	City State Zip Code Sterling VA 20164-5430	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Gryphon Technologies, LL Senior System Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	<b>Transaction ID:</b> 1952151

<b>B.</b>	Full Name (Last, First, Middle Initial) Matthew Eisemann	Date of Receipt MM / DD / YYYY 08 / 18 / 2009
	Mailing Address 440 E Cornell Dr Unit 6	Amount of Each Receipt this Period 50.00
	City State Zip Code Sterling VA 20164-5430	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Gryphon Technologies, LL Senior System Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	<b>Transaction ID:</b> 1952232

<b>C.</b>	Full Name (Last, First, Middle Initial) Matthew Eisemann	Date of Receipt MM / DD / YYYY 08 / 02 / 2009
	Mailing Address 440 E Cornell Dr Unit 6	Amount of Each Receipt this Period 50.00
	City State Zip Code Sterling VA 20164-5430	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Gryphon Technologies, LL Senior System Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	<b>Transaction ID:</b> 1952277

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 263
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Matthew Eisemann	Date of Receipt MM / DD / YYYY 08 / 31 / 2009
	Mailing Address 440 E Cornell Dr Unit 6	Amount of Each Receipt this Period 50.00
	City State Zip Code Sterling VA 20164-5430	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952286
	Name of Employer Occupation Gryphon Technologies, LL Senior System Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Matthew Eisemann	Date of Receipt MM / DD / YYYY 09 / 28 / 2009
	Mailing Address 440 E Cornell Dr Unit 6	Amount of Each Receipt this Period 50.00
	City State Zip Code Sterling VA 20164-5430	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952365
	Name of Employer Occupation Gryphon Technologies, LL Senior System Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Matthew Eisemann	Date of Receipt MM / DD / YYYY 07 / 20 / 2009
	Mailing Address 440 E Cornell Dr Unit 6	Amount of Each Receipt this Period 50.00
	City State Zip Code Sterling VA 20164-5430	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952153
	Name of Employer Occupation Gryphon Technologies, LL Senior System Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Max Eskildsen		Date of Receipt
	Mailing Address 6516 W 51st St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 27 / 2009
	City	State	Zip Code
	Mission	KS	66202-1734
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
			100.00
Name of Employer Not employed		Occupation Retired	Transaction ID: 1952290
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Max Eskildsen		Date of Receipt
	Mailing Address 6516 W 51st St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 27 / 2009
	City	State	Zip Code
	Mission	KS	66202-1734
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
			100.00
Name of Employer Not employed		Occupation Retired	Transaction ID: 1952363
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Max Eskildsen		Date of Receipt
	Mailing Address 6516 W 51st St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 27 / 2009
	City	State	Zip Code
	Mission	KS	66202-1734
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
			100.00
Name of Employer Not employed		Occupation Retired	Transaction ID: 1952199
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 263
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Geary		Date of Receipt
	Mailing Address 415 Lagunitas Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 23 / 2009
	City	State	Zip Code
	Oakland	CA	94610-3544
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 50.00
Name of Employer United Behavioral Health		Occupation Administrator	Transaction ID: 1952275
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 520.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Rita Gomez		Date of Receipt
	Mailing Address 4060 Beethoven St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 30 / 2009
	City	State	Zip Code
	Los Angeles	CA	90066-5112
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 20.00
Name of Employer The J Paul Getty Museum		Occupation Museum Preparator	Transaction ID: 1952312
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 665.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Rita Gomez		Date of Receipt
	Mailing Address 4060 Beethoven St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	Los Angeles	CA	90066-5112
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 20.00
Name of Employer The J Paul Getty Museum		Occupation Museum Preparator	Transaction ID: 1952367
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 665.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 90.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 263  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Rita Gomez		Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2009	
Mailing Address 4060 Beethoven St		Amount of Each Receipt this Period 20.00	
City Los Angeles	State CA	Zip Code 90066-5112	
FEC ID number of contributing federal political committee.		Transaction ID: 1952208	
Name of Employer The J Paul Getty Museum	Occupation Museum Preparator		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 665.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms Dorothy Fay Griffin		Date of Receipt M M / D D / Y Y Y Y Y 08 / 05 / 2009	
Mailing Address 30 Campden Circle		Amount of Each Receipt this Period 100.00	
City San Antonio	State TX	Zip Code 78218-1747	
FEC ID number of contributing federal political committee.		Transaction ID: 1952335	
Name of Employer Not employed	Occupation Retired		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 486.50		

<b>C.</b> Full Name (Last, First, Middle Initial) Therese Hankel		Date of Receipt M M / D D / Y Y Y Y Y 08 / 06 / 2009	
Mailing Address PO Box 2728		Amount of Each Receipt this Period 50.00	
City Mammoth Lakes	State CA	Zip Code 93546-2728	
FEC ID number of contributing federal political committee.		Transaction ID: 1952246	
Name of Employer Self employed	Occupation Attorney		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 245.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	170.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Hersch		Date of Receipt MM / DD / YYYY 07 / 20 / 2009
	Mailing Address 111 Cardiff Ct		Amount of Each Receipt this Period 25.00
	City Jacksonville	State NC	
	FEC ID number of contributing federal political committee.		Transaction ID: 1952152
	Name of Employer US Navy	Occupation Military Officer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) George Huckabay		Date of Receipt MM / DD / YYYY 09 / 24 / 2009
	Mailing Address 402 Grimes Dr		Amount of Each Receipt this Period 20.00
	City Auburndale	State FL	
	FEC ID number of contributing federal political committee.		Transaction ID: 1952342
	Name of Employer Not employed	Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 445.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) George Huckabay		Date of Receipt MM / DD / YYYY 07 / 24 / 2009
	Mailing Address 402 Grimes Dr		Amount of Each Receipt this Period 20.00
	City Auburndale	State FL	
	FEC ID number of contributing federal political committee.		Transaction ID: 1952216
	Name of Employer Not employed	Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 445.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	65.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 263
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) George Huckabay		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 9	
Mailing Address 402 Grimes Dr		Amount of Each Receipt this Period 20.00	
City Auburndale	State FL	Zip Code 33823-9568	
FEC ID number of contributing federal political committee.		Transaction ID: 1952239	
Name of Employer Not employed	Occupation Retired		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 445.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ken Kishi		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 8 / 2 0 0 9	
Mailing Address 1531 Beloit Ave Apt 8		Amount of Each Receipt this Period 8.26	
City Los Angeles	State CA	Zip Code 90025-3244	
FEC ID number of contributing federal political committee.		Transaction ID: 1952292	
Name of Employer Gelsons Market	Occupation Clerk		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 383.85		

<b>C.</b> Full Name (Last, First, Middle Initial) Patricia Kolodney		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 6 / 2 0 0 9	
Mailing Address 7447 Cambridge St Apt 95		Amount of Each Receipt this Period 25.00	
City Houston	State TX	Zip Code 77054-2020	
FEC ID number of contributing federal political committee.		Transaction ID: 1952188	
Name of Employer Baylor College of Medici	Occupation Administrative Associate		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	53.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 263
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Dorothy Larimer		Date of Receipt																				
	Mailing Address 541 Overhill Dr		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	7		2	4		2	0	0	9													
	City	State	Zip Code																				
Kerrville	TX	78028-2930																					
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00																					
Name of Employer Not employed		Occupation Retired																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 490.00																					
<b>Transaction ID:</b> 1952215																							

<b>B.</b>	Full Name (Last, First, Middle Initial) Dorothy Larimer		Date of Receipt																				
	Mailing Address 541 Overhill Dr		<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>9</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	9		2	4		2	0	0	9													
	City	State	Zip Code																				
Kerrville	TX	78028-2930																					
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00																					
Name of Employer Not employed		Occupation Retired																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 490.00																					
<b>Transaction ID:</b> 1952341																							

<b>C.</b>	Full Name (Last, First, Middle Initial) Dorothy Larimer		Date of Receipt																				
	Mailing Address 541 Overhill Dr		<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>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	8		2	4		2	0	0	9													
	City	State	Zip Code																				
Kerrville	TX	78028-2930																					
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00																					
Name of Employer Not employed		Occupation Retired																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 490.00																					
<b>Transaction ID:</b> 1952238																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Anne Mac Donald	Date of Receipt MM / DD / YYYY 08 / 26 / 2009
	Mailing Address 788 Ferguson Rd	Amount of Each Receipt this Period 100.00
	City State Zip Code Sebastopol CA 95472-9683	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952304
	Name of Employer Occupation Self employed Investor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2150.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Anne Mac Donald	Date of Receipt MM / DD / YYYY 09 / 27 / 2009
	Mailing Address 788 Ferguson Rd	Amount of Each Receipt this Period 100.00
	City State Zip Code Sebastopol CA 95472-9683	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952360
	Name of Employer Occupation Self employed Investor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2150.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Anne Mac Donald	Date of Receipt MM / DD / YYYY 07 / 26 / 2009
	Mailing Address 788 Ferguson Rd	Amount of Each Receipt this Period 100.00
	City State Zip Code Sebastopol CA 95472-9683	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952185
	Name of Employer Occupation Self employed Investor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2150.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) John Martin	Date of Receipt MM / DD / YYYY 08 / 04 / 2009
	Mailing Address 146 1/2 M St	Amount of Each Receipt this Period 50.00
	City State Zip Code South Boston MA 02127-3174	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952260
	Name of Employer Occupation Hemco Union Sheet Metal Worker	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bonnie Mcconnell	Date of Receipt MM / DD / YYYY 08 / 24 / 2009
	Mailing Address 68 Woodland Ave	Amount of Each Receipt this Period 15.00
	City State Zip Code Staten Island NY 10308-1540	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952240
	Name of Employer Occupation Self employed Registered Nurse	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 480.61	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bonnie Mcconnell	Date of Receipt MM / DD / YYYY 09 / 24 / 2009
	Mailing Address 68 Woodland Ave	Amount of Each Receipt this Period 15.00
	City State Zip Code Staten Island NY 10308-1540	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952343
	Name of Employer Occupation Self employed Registered Nurse	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 480.61	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Bonnie Mcconnell	Date of Receipt MM / DD / YYYY 07 / 24 / 2009
	Mailing Address 68 Woodland Ave	Amount of Each Receipt this Period 15.00
	City State Zip Code Staten Island NY 10308-1540	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952217
	Name of Employer Occupation Self employed Registered Nurse	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 480.61	

<b>B.</b>	Full Name (Last, First, Middle Initial) Barbara Meeks	Date of Receipt MM / DD / YYYY 07 / 24 / 2009
	Mailing Address 713 Roosevelt Rd	Amount of Each Receipt this Period 20.00
	City State Zip Code Redlands CA 92374-6257	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952218
	Name of Employer Occupation Not employed Not employed	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Barbara Meeks	Date of Receipt MM / DD / YYYY 08 / 24 / 2009
	Mailing Address 713 Roosevelt Rd	Amount of Each Receipt this Period 20.00
	City State Zip Code Redlands CA 92374-6257	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952241
	Name of Employer Occupation Not employed Not employed	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	55.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 263
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Barbara Meeks		Date of Receipt
	Mailing Address 713 Roosevelt Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 24 / 2009
	City	State	Zip Code
	Redlands	CA	92374-6257
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Not employed		Occupation Not employed	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 20.00
		<input type="text"/> 320.00	<b>Transaction ID:</b> 1952344

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms Patricia Lynn Messick		Date of Receipt
	Mailing Address 362 Cortez St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 14 / 2009
	City	State	Zip Code
	Sterling	CO	80751-2317
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Info Requested		Occupation Info Requested	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 20.00
		<input type="text"/> 330.00	<b>Transaction ID:</b> 1952147

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Patricia Lynn Messick		Date of Receipt
	Mailing Address 362 Cortez St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 09 / 2009
	City	State	Zip Code
	Sterling	CO	80751-2317
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Info Requested		Occupation Info Requested	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 20.00
		<input type="text"/> 330.00	<b>Transaction ID:</b> 1952315

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 60.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms Patricia Lynn Messick		Date of Receipt
	Mailing Address 362 Cortez St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 29 / 2009
	City	State	Zip Code
	Sterling	CO	80751-2317
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Info Requested		Occupation Info Requested	Amount of Each Receipt this Period <input type="text"/> 20.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 330.00	
Transaction ID: 1952331			

<b>B.</b>	Full Name (Last, First, Middle Initial) Carol Mier		Date of Receipt
	Mailing Address 5115 E 200 S		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 25 / 2009
	City	State	Zip Code
	Knox	IN	46534-7941
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Northern Indiana Public		Occupation Power Plant Operations	Amount of Each Receipt this Period <input type="text"/> 10.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 517.13	
Transaction ID: 1952349			

<b>C.</b>	Full Name (Last, First, Middle Initial) Carol Mier		Date of Receipt
	Mailing Address 5115 E 200 S		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 25 / 2009
	City	State	Zip Code
	Knox	IN	46534-7941
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Northern Indiana Public		Occupation Power Plant Operations	Amount of Each Receipt this Period <input type="text"/> 10.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 517.13	
Transaction ID: 1952203			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 40.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**Schedule A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 263
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Carol Mier		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 9	
Mailing Address 5115 E 200 S		Amount of Each Receipt this Period 10.00	
City State Zip Code Knox IN 46534-7941	FEC ID number of contributing federal political committee.		
Name of Employer Northern Indiana Public	Occupation Power Plant Operations		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 517.13		
		<b>Transaction ID:</b> 1952297	

<b>B.</b> Full Name (Last, First, Middle Initial) Luanne Moore		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 9	
Mailing Address 15 Southern Cross Cir Apt 106		Amount of Each Receipt this Period 20.12	
City State Zip Code Boynton Beach FL 33436-6748	FEC ID number of contributing federal political committee.		
Name of Employer State of Florida	Occupation Engineer		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 992.51		
		<b>Transaction ID:</b> 1952160	

<b>C.</b> Full Name (Last, First, Middle Initial) Herman Moore-Banks		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9	
Mailing Address PO Box 641141		Amount of Each Receipt this Period 100.00	
City State Zip Code San Francisco CA 94164-1141	FEC ID number of contributing federal political committee.		
Name of Employer Self-employed	Occupation Nurse		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 850.00		
		<b>Transaction ID:</b> 1952332	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	130.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 28 / 263</span>
	(check only one)
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b
<input type="checkbox"/> 17b <input type="checkbox"/> 20a	<input type="checkbox"/> 17c <input type="checkbox"/> 20b
<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Herman Moore-Banks	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address PO Box 641141	Amount of Each Receipt this Period 100.00
	City State Zip Code San Francisco CA 94164-1141	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952283
	Name of Employer Occupation Self-employed Nurse	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b>	Full Name (Last, First, Middle Initial) Herman Moore-Banks	Date of Receipt MM / DD / YYYY 07 / 29 / 2009
	Mailing Address PO Box 641141	Amount of Each Receipt this Period 100.00
	City State Zip Code San Francisco CA 94164-1141	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952171
	Name of Employer Occupation Self-employed Nurse	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jane Napier	Date of Receipt MM / DD / YYYY 07 / 26 / 2009
	Mailing Address 1418 Glenavon Ave	Amount of Each Receipt this Period 25.00
	City State Zip Code Venice CA 90291-2919	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952184
	Name of Employer Occupation Self employed Dance Studio Owner	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	225.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Jane Napier		Date of Receipt
	Mailing Address 1418 Glenavon Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 26 / 2009
	City	State	Zip Code
	Venice	CA	90291-2919
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Self employed		Occupation Dance Studio Owner	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 25.00
		<input type="text"/> 725.00	<b>Transaction ID:</b> 1952303

<b>B.</b>	Full Name (Last, First, Middle Initial) Christine Nilson		Date of Receipt
	Mailing Address 154 S Cromwell Pl		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 11 / 2009
	City	State	Zip Code
	Boise	ID	83709-0008
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Not employed		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 25.00
		<input type="text"/> 225.00	<b>Transaction ID:</b> 1952271

<b>C.</b>	Full Name (Last, First, Middle Initial) Hiusze Noom		Date of Receipt
	Mailing Address 12635 Scarsdale St Apt 711		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 19 / 2009
	City	State	Zip Code
	San Antonio	TX	78217-1858
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Cheesecake Factory		Occupation Chef	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 20.00
		<input type="text"/> 280.00	<b>Transaction ID:</b> 1952161

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 70.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Pasquale J Perna	Date of Receipt MM / DD / YYYY 08 / 24 / 2009
	Mailing Address 112 Stewart St	Amount of Each Receipt this Period 10.00
	City State Zip Code Elmont NY 11003-2339	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Us Security Associate Security Guard	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 640.00	Transaction ID: 1952244

<b>B.</b>	Full Name (Last, First, Middle Initial) Pasquale J Perna	Date of Receipt MM / DD / YYYY 07 / 24 / 2009
	Mailing Address 112 Stewart St	Amount of Each Receipt this Period 10.00
	City State Zip Code Elmont NY 11003-2339	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Us Security Associate Security Guard	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 640.00	Transaction ID: 1952221

<b>C.</b>	Full Name (Last, First, Middle Initial) Pasquale J Perna	Date of Receipt MM / DD / YYYY 09 / 24 / 2009
	Mailing Address 112 Stewart St	Amount of Each Receipt this Period 10.00
	City State Zip Code Elmont NY 11003-2339	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Us Security Associate Security Guard	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 640.00	Transaction ID: 1952347

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Julia L Perry		Date of Receipt MM / DD / YYYY 08 / 13 / 2009		
	Mailing Address 8601 Aponi Rd		Amount of Each Receipt this Period 100.00		
	City Vienna	State VA	Zip Code 22180-6807		
	FEC ID number of contributing federal political committee.				
	Name of Employer Federal Government	Occupation Lawyer			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00		Transaction ID: 1952269	

<b>B.</b>	Full Name (Last, First, Middle Initial) Julia L Perry		Date of Receipt MM / DD / YYYY 07 / 13 / 2009		
	Mailing Address 8601 Aponi Rd		Amount of Each Receipt this Period 100.00		
	City Vienna	State VA	Zip Code 22180-6807		
	FEC ID number of contributing federal political committee.				
	Name of Employer Federal Government	Occupation Lawyer			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00		Transaction ID: 1952154	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lynn Prothero		Date of Receipt MM / DD / YYYY 09 / 24 / 2009		
	Mailing Address 23421 Community St		Amount of Each Receipt this Period 20.00		
	City West Hills	State CA	Zip Code 91304-3142		
	FEC ID number of contributing federal political committee.				
	Name of Employer Self employed	Occupation Consultant			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 650.00		Transaction ID: 1952345	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	220.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Lynn Prothero		Date of Receipt
	Mailing Address 23421 Community St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 24 / 2009
	City	State	Zip Code
	West Hills	CA	91304-3142
	FEC ID number of contributing federal political committee.		<input type="text"/>
	Name of Employer Self employed		Occupation Consultant
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 650.00	Amount of Each Receipt this Period <input type="text"/> 20.00
			Transaction ID: 1952243

<b>B.</b>	Full Name (Last, First, Middle Initial) Lynn Prothero		Date of Receipt
	Mailing Address 23421 Community St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 31 / 2009
	City	State	Zip Code
	West Hills	CA	91304-3142
	FEC ID number of contributing federal political committee.		<input type="text"/>
	Name of Employer Self employed		Occupation Consultant
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 650.00	Amount of Each Receipt this Period <input type="text"/> 20.00
			Transaction ID: 1952226

<b>C.</b>	Full Name (Last, First, Middle Initial) Habibur Rahman		Date of Receipt
	Mailing Address 317 9th St Apt 5		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 15 / 2009
	City	State	Zip Code
	Union City	NJ	07087-4156
	FEC ID number of contributing federal political committee.		<input type="text"/>
	Name of Employer Self employed		Occupation NYC
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 2190.00	Amount of Each Receipt this Period <input type="text"/> 150.00
			Transaction ID: 1952265

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 190.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 263

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Jorja Ray		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 9	
Mailing Address P.O.Box 1887/B118		Amount of Each Receipt this Period 10.00	
City Kaunakakai	State HI	Zip Code 96748	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer Self employed	Occupation Jewelry Designer		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00		
		<b>Transaction ID:</b> 1952364	

<b>B.</b> Full Name (Last, First, Middle Initial) Jorja Ray		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 8 / 2 0 0 9	
Mailing Address P.O.Box 1887/B118		Amount of Each Receipt this Period 10.00	
City Kaunakakai	State HI	Zip Code 96748	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer Self employed	Occupation Jewelry Designer		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00		
		<b>Transaction ID:</b> 1952293	

<b>C.</b> Full Name (Last, First, Middle Initial) Jorja Ray		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 8 / 2 0 0 9	
Mailing Address P.O.Box 1887/B118		Amount of Each Receipt this Period 10.00	
City Kaunakakai	State HI	Zip Code 96748	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer Self employed	Occupation Jewelry Designer		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00		
		<b>Transaction ID:</b> 1952174	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	30.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	30.00

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Kathleen Reeve		Date of Receipt
	Mailing Address 2439 Meridian Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 24 / 2009
	City	State	Zip Code
	San Jose	CA	95124-1744
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00
Name of Employer Self employed		Occupation Photographer	Transaction ID: 1952340
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 420.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathleen Reeve		Date of Receipt
	Mailing Address 2439 Meridian Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 24 / 2009
	City	State	Zip Code
	San Jose	CA	95124-1744
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00
Name of Employer Self employed		Occupation Photographer	Transaction ID: 1952214
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 420.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kathleen Reeve		Date of Receipt
	Mailing Address 2439 Meridian Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 24 / 2009
	City	State	Zip Code
	San Jose	CA	95124-1744
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00
Name of Employer Self employed		Occupation Photographer	Transaction ID: 1952237
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 420.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Ellen Roswall		Date of Receipt
	Mailing Address 1385 28th St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 26 / 2009
	City	State	Zip Code
	Huntington	WV	25705-1260
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 25.00
Name of Employer Not employed		Occupation Not employed	Transaction ID: 1952183
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 475.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ellen Roswall		Date of Receipt
	Mailing Address 1385 28th St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 26 / 2009
	City	State	Zip Code
	Huntington	WV	25705-1260
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 25.00
Name of Employer Not employed		Occupation Not employed	Transaction ID: 1952301
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 475.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ellen Roswall		Date of Receipt
	Mailing Address 1385 28th St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2009
	City	State	Zip Code
	Huntington	WV	25705-1260
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 25.00
Name of Employer Not employed		Occupation Not employed	Transaction ID: 1952352
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Scott	Date of Receipt MM / DD / YYYY 07 / 18 / 2009
	Mailing Address 36 S 9th St Apt 1207	Amount of Each Receipt this Period 20.00
	City State Zip Code Minneapolis MN 55402-3135	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952169
	Name of Employer Occupation SAS Institute Pte Ltd. Principal Technical Arch	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 715.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen Scott	Date of Receipt MM / DD / YYYY 08 / 18 / 2009
	Mailing Address 36 S 9th St Apt 1207	Amount of Each Receipt this Period 20.00
	City State Zip Code Minneapolis MN 55402-3135	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952233
	Name of Employer Occupation SAS Institute Pte Ltd. Principal Technical Arch	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 715.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Stephen Scott	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 36 S 9th St Apt 1207	Amount of Each Receipt this Period 20.00
	City State Zip Code Minneapolis MN 55402-3135	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952336
	Name of Employer Occupation SAS Institute Pte Ltd. Principal Technical Arch	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 715.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Pamela Smith		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 9	
Mailing Address 14 Gartland St # 2		Amount of Each Receipt this Period 100.00	
City Jamaica Plain	State MA	Zip Code 02130-3324	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Minelli Inc.	Occupation Brand Strategy Developme		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 915.05		
<b>Transaction ID:</b> 1952224			

<b>B.</b> Full Name (Last, First, Middle Initial) Linda Strong		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 6 / 2 0 0 9	
Mailing Address 898 SE Dahman Rd POBox 367		Amount of Each Receipt this Period 20.00	
City Shelton	State WA	Zip Code 98584	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 20.00	
Name of Employer Not employed	Occupation Retired		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 504.62		
<b>Transaction ID:</b> 1952302			

<b>C.</b> Full Name (Last, First, Middle Initial) Linda Strong		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 9	
Mailing Address 898 SE Dahman Rd POBox 367		Amount of Each Receipt this Period 20.00	
City Shelton	State WA	Zip Code 98584	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 20.00	
Name of Employer Not employed	Occupation Retired		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 504.62		
<b>Transaction ID:</b> 1952353			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	140.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Linda Strong	Date of Receipt MM / DD / YYYY 07 / 26 / 2009
	Mailing Address 898 SE Dahman Rd POBox 367	Amount of Each Receipt this Period 20.00
	City State Zip Code Shelton WA 98584	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Not employed Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 504.62	Transaction ID: 1952182

<b>B.</b>	Full Name (Last, First, Middle Initial) Leith Ter Meulen	Date of Receipt MM / DD / YYYY 09 / 22 / 2009
	Mailing Address 244 Madison Ave	Amount of Each Receipt this Period 15.00
	City State Zip Code New York NY 10016-2817	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Landair Business Owner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 385.00	Transaction ID: 1952339

<b>C.</b>	Full Name (Last, First, Middle Initial) Leith Ter Meulen	Date of Receipt MM / DD / YYYY 07 / 22 / 2009
	Mailing Address 244 Madison Ave	Amount of Each Receipt this Period 15.00
	City State Zip Code New York NY 10016-2817	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Landair Business Owner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 385.00	Transaction ID: 1952223

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Leith Ter Meulen	Date of Receipt MM / DD / YYYY 08 / 23 / 2009
	Mailing Address 244 Madison Ave	Amount of Each Receipt this Period 15.00
	City State Zip Code New York NY 10016-2817	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952276
	Name of Employer Occupation Landair Business Owner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 385.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Torres	Date of Receipt MM / DD / YYYY 09 / 26 / 2009
	Mailing Address 3410 Brookside Parkway North Dr	Amount of Each Receipt this Period 25.00
	City State Zip Code Indianapolis IN 46218-4406	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952359
	Name of Employer Occupation Ind-Marion County Public Reference Assistant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Torres	Date of Receipt MM / DD / YYYY 08 / 26 / 2009
	Mailing Address 3410 Brookside Parkway North Dr	Amount of Each Receipt this Period 25.00
	City State Zip Code Indianapolis IN 46218-4406	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952310
	Name of Employer Occupation Ind-Marion County Public Reference Assistant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	65.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Torres	Date of Receipt MM / DD / YYYY 07 / 26 / 2009
	Mailing Address 3410 Brookside Parkway North Dr	Amount of Each Receipt this Period 25.00
	City State Zip Code Indianapolis IN 46218-4406	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Ind-Marion County Public Reference Assistant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	<b>Transaction ID:</b> 1952192

<b>B.</b>	Full Name (Last, First, Middle Initial) Luciano Travaglia	Date of Receipt MM / DD / YYYY 07 / 24 / 2009
	Mailing Address Corso Italia 22	Amount of Each Receipt this Period 10.00
	City State Zip Code Gualdo Tadino NY	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Railway Clerk	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 980.00	<b>Transaction ID:</b> 1952222

<b>C.</b>	Full Name (Last, First, Middle Initial) Fran Uhlenhopp	Date of Receipt MM / DD / YYYY 07 / 29 / 2009
	Mailing Address 509 Twin Rivers Dr	Amount of Each Receipt this Period 20.00
	City State Zip Code Boone NC 28607-6632	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Not employed Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 374.80	<b>Transaction ID:</b> 1952228

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	55.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Fran Uhlenhopp		Date of Receipt MM / DD / YYYY 08 / 29 / 2009
	Mailing Address 509 Twin Rivers Dr		Amount of Each Receipt this Period 20.00
	City Boone	State NC	
	FEC ID number of contributing federal political committee.		Transaction ID: 1952300
	Name of Employer Not employed	Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 374.80		

<b>B.</b>	Full Name (Last, First, Middle Initial) Axel Van Der Velden		Date of Receipt MM / DD / YYYY 07 / 16 / 2009
	Mailing Address PO Box 5468		Amount of Each Receipt this Period 10.00
	City Salton City	State CA	
	FEC ID number of contributing federal political committee.		Transaction ID: 1952159
	Name of Employer Casino	Occupation Manager/Supervisor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 445.76		

<b>C.</b>	Full Name (Last, First, Middle Initial) Michaelq Wensink		Date of Receipt MM / DD / YYYY 07 / 27 / 2009
	Mailing Address 8380 Pearl Rd Apt 402		Amount of Each Receipt this Period 50.00
	City Strongsville	State OH	
	FEC ID number of contributing federal political committee.		Transaction ID: 1952197
	Name of Employer US Government	Occupation Investigator	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 950.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Michaelq Wensink	Date of Receipt MM / DD / YYYY 08 / 27 / 2009
	Mailing Address 8380 Pearl Rd Apt 402	Amount of Each Receipt this Period 50.00
	City State Zip Code Strongsville OH 44136-1662	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952288
	Name of Employer Occupation US Government Investigator	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 950.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michaelq Wensink	Date of Receipt MM / DD / YYYY 09 / 27 / 2009
	Mailing Address 8380 Pearl Rd Apt 402	Amount of Each Receipt this Period 50.00
	City State Zip Code Strongsville OH 44136-1662	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952361
	Name of Employer Occupation US Government Investigator	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 950.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Flora K Willett	Date of Receipt MM / DD / YYYY 08 / 07 / 2009
	Mailing Address 30937 17th Ave SW Apt D	Amount of Each Receipt this Period 20.00
	City State Zip Code Federal Way WA 98023-4332	
	FEC ID number of contributing federal political committee.	Transaction ID: 1952230
	Name of Employer Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 232.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 263
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Unitemized Donors	Date of Receipt
	Mailing Address	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text"/> 2255.00
	Name of Employer Occupation	Unitemized Donors
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 2255.00	Transaction ID: UI_20090701

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2255.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 6803.38

**Schedule A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 / 263
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Bryan Cave LLP Political Fund	Date of Receipt
	Mailing Address 700 13th St NW Ste 700	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 29 / 2009
	City State Zip Code Washington DC 20005-6619	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <input type="text"/> C00332643	<input type="text"/> 2500.00
	Name of Employer Occupation	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 4800.00
		<b>Transaction ID:</b> 1952170

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 2500.00

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 263
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Travel Related Services		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2009	
Mailing Address 20002 North 19th Avenue		Amount of Each Receipt this Period 2244.31	
City State Zip Code Phoenix AZ 85027	FEC ID number of contributing federal political committee.		
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 8425.60		Travel Refund Transaction ID: C2893906

<b>B.</b> Full Name (Last, First, Middle Initial) Cobra Administration & Health Services, Inc.		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2009	
Mailing Address Post Office Box 866		Amount of Each Receipt this Period 4801.29	
City State Zip Code North Kingstown RI 02852	FEC ID number of contributing federal political committee.		
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 24329.43		Employee Benefits Refund Transaction ID: C2893900

<b>C.</b> Full Name (Last, First, Middle Initial) Cobra Administration & Health Services, Inc.		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2009	
Mailing Address Post Office Box 866		Amount of Each Receipt this Period 3880.89	
City State Zip Code North Kingstown RI 02852	FEC ID number of contributing federal political committee.		
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 24329.43		Employee Benefits Refund Transaction ID: C2893907

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10926.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 / 263
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Cobra Administration & Health Services, Inc.		Date of Receipt
	Mailing Address Post Office Box 866		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 01 / 2009
	City	State	Zip Code
	North Kingstown	RI	02852
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text"/> 3351.20
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 24329.43	Employee Benefits Refund
			Transaction ID: C2893913

<b>B.</b>	Full Name (Last, First, Middle Initial) Democratic Party of Virginia		Date of Receipt
	Mailing Address CC Federal Account		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2009
	1710 East Franklin Street		
	City	State	Zip Code
	Richmond	VA	23223
FEC ID number of contributing federal political committee.		<input type="text"/>	Amount of Each Receipt this Period
			<input type="text"/> 600.00
Name of Employer		Occupation	Sale of Assets
			Transaction ID: C2893916
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 2830.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Toll Bros., Inc.		Date of Receipt
	Mailing Address 250 Gibraltar Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 28 / 2009
	City	State	Zip Code
	Horsham	PA	19044
FEC ID number of contributing federal political committee.		<input type="text"/>	Amount of Each Receipt this Period
			<input type="text"/> 3500.00
Name of Employer		Occupation	Security Deposit Refund
			Transaction ID: C2893919
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 3500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 7451.20
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 263

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 1 / 2 0 0 9	
Mailing Address PO Box 2167		Amount of Each Receipt this Period 12.30	
City Folsom	State CA	Zip Code 95763-2167	
FEC ID number of contributing federal political committee.		Telephone Service Refund	
Name of Employer	Occupation		Transaction ID: C2893917
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 48.45		

<b>B.</b> Full Name (Last, First, Middle Initial) Verizon		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 7 / 2 0 0 9	
Mailing Address 350 Granite Street 2nd Floor		Amount of Each Receipt this Period 3260.29	
City Braintree	State MA	Zip Code 02184-3905	
FEC ID number of contributing federal political committee.		Telephone Service Refund	
Name of Employer	Occupation		Transaction ID: C2893905
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 65805.88		

<b>C.</b> Full Name (Last, First, Middle Initial) Verizon		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 8 / 2 0 0 9	
Mailing Address 350 Granite Street 2nd Floor		Amount of Each Receipt this Period 3994.48	
City Braintree	State MA	Zip Code 02184-3905	
FEC ID number of contributing federal political committee.		Telephone Service Refund	
Name of Employer	Occupation		Transaction ID: C2893915
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 65805.88		

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7267.07**

**TOTAL** This Period (last page this line number only) ..... ▶ **25644.76**

# Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 263

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>		Full Name (Last, First, Middle Initial) Artur Davis 2010		Date of Receipt	
Mailing Address Post Office Box 1845		City Birmingham		M M / D D / Y Y Y Y Y 0 8 / 1 4 / 2 0 0 9	
State AL		Zip Code 35201		Amount of Each Receipt this Period 1386.40	
FEC ID number of contributing federal political committee.		Name of Employer		List Rental Income	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1386.40		Transaction ID: C2893911	

<b>B.</b>		Full Name (Last, First, Middle Initial) Bill Ritter for Governor		Date of Receipt	
Mailing Address Post Office Box 13648		City Denver		M M / D D / Y Y Y Y Y 0 9 / 0 4 / 2 0 0 9	
State CO		Zip Code 80201		Amount of Each Receipt this Period 3219.40	
FEC ID number of contributing federal political committee.		Name of Employer		List Rental Income	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3219.40		Transaction ID: C2893914	

<b>C.</b>		Full Name (Last, First, Middle Initial) Bill White for Texas		Date of Receipt	
Mailing Address 109 North Post Oak Lane		City Houston		M M / D D / Y Y Y Y Y 0 8 / 2 7 / 2 0 0 9	
Suite 350		State TX		Amount of Each Receipt this Period 13978.60	
Zip Code 77024		Name of Employer		List Rental Income	
FEC ID number of contributing federal political committee.		Election Cycle-to-Date ▼ 13978.60		Transaction ID: C2893912	

**SUBTOTAL** of Receipts This Page (optional) ..... ► 18584.40

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



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 / 263
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Celco		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 6 / 2 0 0 9	
Mailing Address 9663 Main Street Suite C		Amount of Each Receipt this Period 47753.12	
City State Zip Code Fairfax VA 22031-3758		List Rental Income Transaction ID: C2893902	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 130440.75	
Name of Employer Occupation		List Rental Income Transaction ID: C2893902	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 130440.75	

<b>B.</b> Full Name (Last, First, Middle Initial) Committee To Elect Diane Denish, Inc.		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 3 / 2 0 0 9	
Mailing Address 500 Marquette Avenue, N.W. Suite 800		Amount of Each Receipt this Period 1431.40	
City State Zip Code Albuquerque NM 87102		List Rental Income Transaction ID: C2893908	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1431.40	
Name of Employer Occupation		List Rental Income Transaction ID: C2893908	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1431.40	

<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Byron Dorgan		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 1 / 2 0 0 9	
Mailing Address Post Office Box 871		Amount of Each Receipt this Period 180.60	
City State Zip Code Bismarck ND 58502		List Rental Income Transaction ID: C2893904	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 180.60	
Name of Employer Occupation		List Rental Income Transaction ID: C2893904	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 180.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	49365.12
<b>TOTAL</b> This Period (last page this line number only) .....	.....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 263
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends of Schumer	Date of Receipt MM / DD / YYYY 07 / 21 / 2009
	Mailing Address 509 Madison Avenue Suite 1902	Amount of Each Receipt this Period 23775.40
	City State Zip Code New York NY 10022	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 23775.40 List Rental Income

**Transaction ID:** C2893903

<b>B.</b>	Full Name (Last, First, Middle Initial) Hodes for Senate	Date of Receipt MM / DD / YYYY 08 / 24 / 2009
	Mailing Address 379 Elm Street	Amount of Each Receipt this Period 2026.60
	City State Zip Code Manchester NH 03101	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2026.60 List Rental Income

**Transaction ID:** C2893910

<b>C.</b>	Full Name (Last, First, Middle Initial) Kilroy for Congress	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address 550 East Walnut Street	Amount of Each Receipt this Period 2818.50
	City State Zip Code Columbus OH 43215	
	FEC ID number of contributing federal political committee. C00416156	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2818.50 List Rental Income

**Transaction ID:** C2893918

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	28620.50
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 263
	<input type="checkbox"/> 16 <input type="checkbox"/> 17a <input type="checkbox"/> 17b <input type="checkbox"/> 17c <input type="checkbox"/> 17d <input checked="" type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Merrill Lynch	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 1152 15th Street, N.W. Suite 6000	Amount of Each Receipt this Period 0.97
	City State Zip Code Washington DC 20005	Banking Interest
	FEC ID number of contributing federal political committee.	Transaction ID: C2893926
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1587779.45	

<b>B.</b>	Full Name (Last, First, Middle Initial) Merrill Lynch	Date of Receipt MM / DD / YYYY 08 / 31 / 2009
	Mailing Address 1152 15th Street, N.W. Suite 6000	Amount of Each Receipt this Period 0.91
	City State Zip Code Washington DC 20005	Banking Interest
	FEC ID number of contributing federal political committee.	Transaction ID: C2893927
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1587779.45	

<b>C.</b>	Full Name (Last, First, Middle Initial) Merrill Lynch	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 1152 15th Street, N.W. Suite 6000	Amount of Each Receipt this Period 1.07
	City State Zip Code Washington DC 20005	Banking Interest
	FEC ID number of contributing federal political committee.	Transaction ID: C2893928
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1587779.45	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2.95
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 263
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) National Institute for International Affairs	Date of Receipt MM / DD / YYYY 08 / 18 / 2009
	Mailing Address 2030 M Street, N.W.	Amount of Each Receipt this Period 1703.60
	City State Zip Code Washington DC 20036-3306	
	FEC ID number of contributing federal political committee.	List Rental Income
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 1703.60		Transaction ID: C2893909

<b>B.</b>	Full Name (Last, First, Middle Initial) WomenCount	Date of Receipt MM / DD / YYYY 07 / 07 / 2009
	Mailing Address 1016 Lincoln Boulevard Suite 303	Amount of Each Receipt this Period 73375.43
	City State Zip Code San Francisco CA 94129	
	FEC ID number of contributing federal political committee.	List Rental Income
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 220332.05		Transaction ID: C2893901

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75079.03
<b>TOTAL</b> This Period (last page this line number only) .....	171652.00

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) A To Z RentAll & Sales, Inc.  Mailing Address 2209 South Stoughton Road  City Madison State WI Zip Code 53716-2894  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72934 Date of Disbursement 07 / 24 / 2009  Amount of Each Disbursement this Period -502.72  Prior Period Void 6/30/08
B.	Full Name (Last, First, Middle Initial) Action Party Rentals, Inc.  Mailing Address 620 Union Boulevard  City Allentown State PA Zip Code 18109  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72951 Date of Disbursement 07 / 24 / 2009  Amount of Each Disbursement this Period -514.00  Prior Period Void 6/30/08
C.	Full Name (Last, First, Middle Initial) Action Party Rentals, Inc.  Mailing Address 620 Union Boulevard  City Allentown State PA Zip Code 18109  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72952 Date of Disbursement 07 / 24 / 2009  Amount of Each Disbursement this Period -541.94  Prior Period Void 6/30/08

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

-1558.66

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Alabama Secretary of State Corporations Division  Mailing Address Post Office Box 5616  City Montgomery State AL Zip Code 36103-5616 Purpose of Disbursement Registration Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73166 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9  Amount of Each Disbursement this Period 20.00  Category/ Type
B.	Full Name (Last, First, Middle Initial) All Points Communications  Mailing Address 40214 Industrial Park Circle Suite 102  City Georgetown State TX Zip Code 78626 Purpose of Disbursement Event Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72935 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period -1277.35  Category/ Type  Prior Period Void 6/30/08
C.	Full Name (Last, First, Middle Initial) Allied Telecom, LLC  Mailing Address Post Office Box 758792  City Baltimore State MD Zip Code 21275-8792 Purpose of Disbursement Internet Service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72911 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9  Amount of Each Disbursement this Period 140.00  Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-1117.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
American Bank Center Convention Center

Mailing Address PO Box 23040

City State Zip Code  
Corpus Christi TX 78403

Purpose of Disbursement  
Event Expense: Catering/Venue

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-72936  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Prior Period Void 06/30/08

**B.** Full Name (Last, First, Middle Initial)  
American Express

Mailing Address Post Office Box 1270

City State Zip Code  
Newark NJ 07101-1270

Purpose of Disbursement  
Credit Card Pymt: Items Below

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73149  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

See Attached Memo Entry

**C.** Full Name (Last, First, Middle Initial)  
Fitzpatrick Hotel

Mailing Address 141 East 44th Street

City State Zip Code  
New York NY 10017

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73149-10000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]  
Memo Entry

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73150 Date of Disbursement 07 / 08 / 2009  Amount of Each Disbursement this Period 49.00  See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) GoToMeeting Services  Mailing Address 5385 Hollister Avenue  City Santa Barbara State CA Zip Code 93111  Purpose of Disbursement Subscription Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73150-10000 Date of Disbursement 05 / 23 / 2009  Amount of Each Disbursement this Period 49.00  [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Process Fee Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73390 Date of Disbursement 07 / 21 / 2009  Amount of Each Disbursement this Period 11.18

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	60.18
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72975 Date of Disbursement 07 / 29 / 2009  Amount of Each Disbursement this Period -1349.50  Prior Period Void 7/7/08
B.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72976 Date of Disbursement 07 / 29 / 2009  Amount of Each Disbursement this Period -322.63  Prior Period Void 7/7/08
C.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72977 Date of Disbursement 07 / 29 / 2009  Amount of Each Disbursement this Period -300.06  Prior Period Void 7/7/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-1972.19
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72978 Date of Disbursement 07 / 29 / 2009  Amount of Each Disbursement this Period -163.90  Prior Period Void 7/7/08
B.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72980 Date of Disbursement 07 / 31 / 2009  Amount of Each Disbursement this Period 1349.50  See Attached Memo Entry
C.	Full Name (Last, First, Middle Initial) US Airways  Mailing Address 111 West Rio Salado Parkway  City Tempe State AZ Zip Code 85281  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72980-10000 Date of Disbursement 07 / 31 / 2009  Amount of Each Disbursement this Period 401.00  [MEMO ITEM] Memo Entry

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

1185.60

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) US Airways Mailing Address 111 West Rio Salado Parkway City Tempe State AZ Zip Code 85281 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72980-20000 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 401.00 [MEMO ITEM] Memo Entry
	Category/ Type 002	

<b>B.</b> Full Name (Last, First, Middle Initial) US Airways Mailing Address 111 West Rio Salado Parkway City Tempe State AZ Zip Code 85281 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72980-30000 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 547.50 [MEMO ITEM] Memo Entry
	Category/ Type 002	

<b>C.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address Post Office Box 1270 City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72981 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 322.63 See Attached Memo Entry
	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	322.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Sheraton Hotel	Transaction ID: SB23-72981-10000 Date of Disbursement 07 / 31 / 2009
	Mailing Address 2101 North Oak Street	Amount of Each Disbursement this Period 209.68
	City Myrtle Beach State SC Zip Code 29577	
	Purpose of Disbursement Travel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Memo Entry

B.	Full Name (Last, First, Middle Initial) Sheraton Hotel	Transaction ID: SB23-72981-20000 Date of Disbursement 07 / 31 / 2009
	Mailing Address 3315 Scott Futrell Drive	Amount of Each Disbursement this Period 112.95
	City Charlotte State NC Zip Code 28208	
	Purpose of Disbursement Travel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Memo Entry

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB23-72982 Date of Disbursement 07 / 31 / 2009
	Mailing Address Post Office Box 1270	Amount of Each Disbursement this Period 300.06
	City Newark State NJ Zip Code 07101-1270	
	Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	300.06
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Budget Rent A Car  Mailing Address 6 Sylvan Way  City Parsippany State NJ Zip Code 07054  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72982-10000 Date of Disbursement 07 / 31 / 2009  Amount of Each Disbursement this Period 300.06  <b>[MEMO ITEM]</b> Memo Entry
B.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72983 Date of Disbursement 07 / 31 / 2009  Amount of Each Disbursement this Period 163.90  See Attached Memo Entry
C.	Full Name (Last, First, Middle Initial) Hyatt Regency  Mailing Address 220 North Main Street  City Greenville State SC Zip Code 29601  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72983-10000 Date of Disbursement 07 / 31 / 2009  Amount of Each Disbursement this Period 163.90  <b>[MEMO ITEM]</b> Memo Entry

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

163.90

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB23-73220 Date of Disbursement 08 / 04 / 2009
	Mailing Address Post Office Box 1270	Amount of Each Disbursement this Period 532.00
	City Newark State NJ Zip Code 07101-1270	
	Purpose of Disbursement Credit Card Pymt: Items Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

B.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB23-73220-10000 Date of Disbursement 07 / 14 / 2009
	Mailing Address 60 Massachusetts Avenue, N.E.	Amount of Each Disbursement this Period 532.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Travel	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB23-73221 Date of Disbursement 08 / 04 / 2009
	Mailing Address Post Office Box 1270	Amount of Each Disbursement this Period 46.01
	City Newark State NJ Zip Code 07101-1270	
	Purpose of Disbursement Credit Card Pymt: Items Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	578.01
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) UPS Mailing Address 55 Glenlake Parkway NE City Atlanta State GA Zip Code 30328 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-73221-10000 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 13.89 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) UPS Mailing Address 55 Glenlake Parkway NE City Atlanta State GA Zip Code 30328 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-73221-20000 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 16.87 [MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) UPS Mailing Address 55 Glenlake Parkway NE City Atlanta State GA Zip Code 30328 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-73221-30000 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 15.25 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) American Express Mailing Address Post Office Box 1270 City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73222 Date of Disbursement 08 / 04 / 2009 Amount of Each Disbursement this Period 116.80 See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) GoToMeeting Services Mailing Address 5385 Hollister Avenue City Santa Barbara State CA Zip Code 93111 Purpose of Disbursement Subscription Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73222-10000 Date of Disbursement 07 / 23 / 2009 Amount of Each Disbursement this Period 49.00 [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) GoToMyPC.com Mailing Address 5385 Hollister Avenue City Santa Barbara State CA Zip Code 93111 Purpose of Disbursement Subscription Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73222-20000 Date of Disbursement 07 / 12 / 2009 Amount of Each Disbursement this Period 67.80 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	116.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address Post Office Box 1270 City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name	Transaction ID: SB23-73223 Date of Disbursement MM / DD / YYYY 08 / 05 / 2009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) Budget Rent A Car Mailing Address 6 Sylvan Way City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Travel Candidate Name	Transaction ID: SB23-73223-10000 Date of Disbursement MM / DD / YYYY 08 / 01 / 2009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address Post Office Box 1270 City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement Credit Card Process Fee Candidate Name	Transaction ID: SB23-73398 Date of Disbursement MM / DD / YYYY 08 / 21 / 2009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	68.17
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73610 Date of Disbursement <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>9</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>575.20</td> </tr> </table> See Attached Memo Entry	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	9		2	0	0	9	575.20
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	9		2	0	0	9														
575.20																							
<b>B.</b>	Full Name (Last, First, Middle Initial) Hotels.com  Mailing Address 10440 North Central Expressway  City Dallas State TX Zip Code 75231  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73610-10000 Date of Disbursement <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>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>575.20</td> </tr> </table> [MEMO ITEM] Memo Entry	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	0	9	575.20
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	2		2	0	0	9														
575.20																							
<b>C.</b>	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73611 Date of Disbursement <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>9</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>17.79</td> </tr> </table> See Attached Memo Entry	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	9		2	0	0	9	17.79
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	9		2	0	0	9														
17.79																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td>592.99</td> </tr> </table>	592.99
592.99		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td> </td> </tr> </table>	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
UPS

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73611-10000  
Date of Disbursement

08 / 27 / 2009

Amount of Each Disbursement this Period

17.79

[MEMO ITEM]  
Memo Entry

B.

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address Post Office Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Pymt: Items Below

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73612  
Date of Disbursement

09 / 09 / 2009

Amount of Each Disbursement this Period

116.80

See Attached Memo Entry

C.

Full Name (Last, First, Middle Initial)  
GoToMeeting Services

Mailing Address 5385 Hollister Avenue

City Santa Barbara State CA Zip Code 93111

Purpose of Disbursement  
Subscription

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73612-10000  
Date of Disbursement

08 / 23 / 2009

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]  
Memo Entry

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

116.80

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) GoToMyPC.com Mailing Address 5385 Hollister Avenue City Santa Barbara State CA Zip Code 93111 Purpose of Disbursement Subscription Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73612-20000 Date of Disbursement 08 / 12 / 2009 Amount of Each Disbursement this Period 67.80 [MEMO ITEM] Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) American Express Mailing Address Post Office Box 1270 City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement Credit Card Pymt: Items Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73542 Date of Disbursement 09 / 10 / 2009 Amount of Each Disbursement this Period 50.00 See Attached Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) Avis Rent A Car Mailing Address 6 Sylvan Way City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73542-10000 Date of Disbursement 07 / 27 / 2009 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	50.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) American Express  Mailing Address Post Office Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Process Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73538 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2009  Amount of Each Disbursement this Period 9.05
B.	Full Name (Last, First, Middle Initial) American International Recov.  Mailing Address Post Office Box 105795  City Atlanta State GA Zip Code 30348-9864  Purpose of Disbursement Committee Insurance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72912 Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2009  Amount of Each Disbursement this Period 1065.55
C.	Full Name (Last, First, Middle Initial) Arizona Department of Revenue  Mailing Address Post Office Box 29009  City Phoenix State AZ Zip Code 85038-9009  Purpose of Disbursement Taxes Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73445 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2009  Amount of Each Disbursement this Period 109.37

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1183.97</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Arkansas Secretary of State Business & Commercial Services Mailing Address 250 Victory Building 1401 West Capitol City Little Rock State AR Zip Code 72201 Purpose of Disbursement Registration Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73167 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9 Amount of Each Disbursement this Period 300.00 Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Ilya Aspis Mailing Address 14 Cornell Place City Manalapan State NJ Zip Code 07726 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-72913 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9 Amount of Each Disbursement this Period 38.32 Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) ASCAP Attn: Processing Department Mailing Address 2675 Paces Ferry Road, S.E. Suite 350 City Atlanta State GA Zip Code 30339 Purpose of Disbursement License Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-72956 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 9 Amount of Each Disbursement this Period -8290.22 Category/Type Prior Period Void 1/15/08

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

**-7951.90**

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

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**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) ASCAP Attn: Processing Department	Transaction ID: SB23-72987 Date of Disbursement
	Mailing Address 2675 Paces Ferry Road, S.E. Suite 350	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Atlanta State GA Zip Code 30339	Amount of Each Disbursement this Period
	Purpose of Disbursement License Fee	<input type="text" value="8290.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB23-72914 Date of Disbursement
	Mailing Address Post Office Box 6463	<input type="text" value="07"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Carol Stream State IL Zip Code 60197-6463	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Service	<input type="text" value="915.66"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB23-73056 Date of Disbursement
	Mailing Address Post Office Box 6463	<input type="text" value="08"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Carol Stream State IL Zip Code 60197-6463	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Service	<input type="text" value="753.42"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9959.30"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) AT&T Mobility <hr/> Mailing Address Post Office Box 6463 <hr/> City State Zip Code Carol Stream IL 60197-6463 <hr/> Purpose of Disbursement Telephone Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73446 Date of Disbursement 09 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 816.75
B.	Full Name (Last, First, Middle Initial) AVF Consulting, Inc. <hr/> Mailing Address 1220-C East Joppa Road Suite 514 <hr/> City State Zip Code Baltimore MD 21286 <hr/> Purpose of Disbursement Consulting/ Accounting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72954 Date of Disbursement 07 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 393.75
C.	Full Name (Last, First, Middle Initial) AVF Consulting, Inc. <hr/> Mailing Address 1220-C East Joppa Road Suite 514 <hr/> City State Zip Code Baltimore MD 21286 <hr/> Purpose of Disbursement Consulting/ Accounting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72955 Date of Disbursement 07 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 225.00

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

1435.50

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



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address 730 15th Street, N.W.  City Washington State DC Zip Code 20005 Purpose of Disbursement Banking Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73122 Date of Disbursement 07 / 15 / 2009  Amount of Each Disbursement this Period 283.55
B.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address 730 15th Street, N.W.  City Washington State DC Zip Code 20005 Purpose of Disbursement Banking Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73153 Date of Disbursement 08 / 17 / 2009  Amount of Each Disbursement this Period 431.92
C.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address 730 15th Street, N.W.  City Washington State DC Zip Code 20005 Purpose of Disbursement Banking Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73541 Date of Disbursement 09 / 15 / 2009  Amount of Each Disbursement this Period 955.44

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1670.91
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Twaine Bell  Mailing Address 301 N Bypass  City Lumberton State NC Zip Code 28358  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72964 Date of Disbursement 07 / 28 / 2009  Amount of Each Disbursement this Period -200.00  Prior Period Void 5/4/08
B.	Full Name (Last, First, Middle Initial) Best Event Rentals  Mailing Address 118 North Sparks Street  City State College State PA Zip Code 16801  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72937 Date of Disbursement 07 / 24 / 2009  Amount of Each Disbursement this Period -359.99  Prior Period Void 06/30/08
C.	Full Name (Last, First, Middle Initial) Blue Marlin  Mailing Address 1200 Lincoln Street  City Columbia State SC Zip Code 29201  Purpose of Disbursement Event Expense: Catering/Venue Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72996 Date of Disbursement 08 / 07 / 2009  Amount of Each Disbursement this Period -599.90  Prior Period Void 10/12/07

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

**-1159.89**

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

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# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Blue Marlin  Mailing Address 1200 Lincoln Street  City Columbia State SC Zip Code 29201  Purpose of Disbursement Event Expense: Catering/Venue Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73028 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period 599.90
<b>B.</b>	Full Name (Last, First, Middle Initial) Cafritz Company/1825 K Street Parking  Mailing Address 1875 Eye Street, N.W. Suite 250  City Washington State DC Zip Code 20006  Purpose of Disbursement Parking Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73010 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period 376.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Cafritz Company/1825 K Street Parking  Mailing Address 1875 Eye Street, N.W. Suite 250  City Washington State DC Zip Code 20006  Purpose of Disbursement Parking Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73057 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 376.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1351.90
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Cafritz Company/1825 K Street Parking <hr/> Mailing Address 1875 Eye Street, N.W. Suite 250 <hr/> City Washington State DC Zip Code 20006 <hr/> Purpose of Disbursement Parking <hr/> Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-73447 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">188.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) Cambridge Transportation <hr/> Mailing Address 36392 Treasury Center <hr/> City Chicago State IL Zip Code 60694-6300 <hr/> Purpose of Disbursement Committee Insurance <hr/> Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-73096 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">4.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) Capital Records & Information Management <hr/> Mailing Address 44112 Mercure Circle <hr/> City Sterling State VA Zip Code 20166 <hr/> Purpose of Disbursement Storage Rent <hr/> Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-72915 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">411.07</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 5px;">603.07</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Capital Records & Information Management <hr/> Mailing Address 44112 Mercure Circle <hr/> City Sterling State VA Zip Code 20166 <hr/> Purpose of Disbursement Storage Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73011 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 271.87
B.	Full Name (Last, First, Middle Initial) Capital Records & Information Management <hr/> Mailing Address 44112 Mercure Circle <hr/> City Sterling State VA Zip Code 20166 <hr/> Purpose of Disbursement Storage Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73448 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 306.79
C.	Full Name (Last, First, Middle Initial) CareFirst BlueCross BlueShield <hr/> Mailing Address Post Office Box 79749 <hr/> City Baltimore State MD Zip Code 21279-0749 <hr/> Purpose of Disbursement Employee Benefits Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72932 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2067.02

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

2645.68

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
CareFirst BlueCross BlueShield

Mailing Address Post Office Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement  
Employee Benefits

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73097  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
CareFirst BlueCross BlueShield

Mailing Address Post Office Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement  
Employee Benefits

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73383  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
City of Anderson

Mailing Address 401 South Main Street

City Anderson State SC Zip Code 29624

Purpose of Disbursement  
Registration Fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73089  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Prior Period Void 1/10/08

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
City of North Las Vegas Fire Department

Mailing Address 4040 Losee Road

City North Las Vegas State NV Zip Code 89030

Purpose of Disbursement  
Event Expense: Catering/Venue

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73133

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
CIT Technology Fin Serve, Inc.

Mailing Address Post Office Box 33076

City Newark State NJ Zip Code 07188-0076

Purpose of Disbursement  
Equipment

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-72916

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
CIT Technology Fin Serve, Inc.

Mailing Address Post Office Box 33076

City Newark State NJ Zip Code 07188-0076

Purpose of Disbursement  
Equipment

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73013

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) CIT Technology Fin Serve, Inc.  Mailing Address Post Office Box 33076  City Newark State NJ Zip Code 07188-0076  Purpose of Disbursement Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73449 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2009  Amount of Each Disbursement this Period 606.62
B.	Full Name (Last, First, Middle Initial) Clark County Fire Department  Mailing Address 575 East Flamingo Road  City Las Vegas State NV Zip Code 89119  Purpose of Disbursement Event Expense: Catering/Venue Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73085 Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2009  Amount of Each Disbursement this Period -250.00  Prior Period Void 11/15/07
C.	Full Name (Last, First, Middle Initial) Classic Party Rentals  Mailing Address 336 West 37th Street  City New York State NY Zip Code 10018  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73086 Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2009  Amount of Each Disbursement this Period -1607.25  Prior Period Void 11/20/08

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

**-1250.63**

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

.....



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Classic Party Rentals Mailing Address 336 West 37th Street City New York State NY Zip Code 10018 Purpose of Disbursement Event Expense: Equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73127 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9 Amount of Each Disbursement this Period 1607.25 Category/ Type
B.	Full Name (Last, First, Middle Initial) Columbia Gas of Pennsylvania Mailing Address 501 Technology Drive City Canonsburg State PA Zip Code 15317 Purpose of Disbursement Office Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72974 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 9 Amount of Each Disbursement this Period -119.85 Prior Period Void 03/20/08 Category/ Type
C.	Full Name (Last, First, Middle Initial) Comcast Mailing Address Post Office Box 3005 City Southeastern State PA Zip Code 19398-3005 Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72917 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9 Amount of Each Disbursement this Period 161.14 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1648.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Comcast  Mailing Address Post Office Box 3005  City Southeastern State PA Zip Code 19398-3005  Purpose of Disbursement Internet Service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73058 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 161.14
B.	Full Name (Last, First, Middle Initial) Comcast  Mailing Address Post Office Box 3005  City Southeastern State PA Zip Code 19398-3005  Purpose of Disbursement Internet Service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73450 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 161.14
C.	Full Name (Last, First, Middle Initial) Compass Facility Mgmt., Inc  Mailing Address 1200 42nd St. South  City Grand Forks State ND Zip Code 58201  Purpose of Disbursement Meal Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72938 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period -68.80  Prior Period Void 06/30/08

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

253.48

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
Conejo Recreation and Parks District

Mailing Address 190 Reino Road  
Borchard Center

City Thousand Oaks State CA Zip Code 91360

Purpose of Disbursement  
Event Expense: Catering/Venue

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73051  
Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

-846.00

Prior Period Void 4/10/08

**B.** Full Name (Last, First, Middle Initial)  
Coral Cedar Center, LLC

Mailing Address 13990 Cedar Road

City Cleveland State OH Zip Code 44118

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-72999  
Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

-1000.00

Prior Period Void 2/15/08

**C.** Full Name (Last, First, Middle Initial)  
Coral Cedar Center, LLC

Mailing Address 13990 Cedar Road

City Cleveland State OH Zip Code 44118

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73029  
Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

1000.00

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

-846.00

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Cybersource Mailing Address 1295 Charleston Road City Mountain View State CA Zip Code 94043 Purpose of Disbursement Credit Card Process Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73389 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 9 Amount of Each Disbursement this Period 13525.69 Category/Type
B.	Full Name (Last, First, Middle Initial) Cybersource Mailing Address 1295 Charleston Road City Mountain View State CA Zip Code 94043 Purpose of Disbursement Credit Card Process Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73393 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period 18489.72 Category/Type
C.	Full Name (Last, First, Middle Initial) Cybersource Mailing Address 1295 Charleston Road City Mountain View State CA Zip Code 94043 Purpose of Disbursement Credit Card Process Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73537 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 9 Amount of Each Disbursement this Period 6368.64 Category/Type

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

**38384.05**

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Dara LC Freed, Inc.</p> <p>Mailing Address 383 Grand Street Number M306</p> <p>City New York State NY Zip Code 10002</p> <p>Purpose of Disbursement Consulting/ Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-72918</p> <p>Date of Disbursement 07 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 6000.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Dara LC Freed, Inc.</p> <p>Mailing Address 383 Grand Street Number M306</p> <p>City New York State NY Zip Code 10002</p> <p>Purpose of Disbursement Consulting/ Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-73059</p> <p>Date of Disbursement 08 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 6000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Nalinee Darmrong</p> <p>Mailing Address 5511 Blair Road, NE</p> <p>City Washington State DC Zip Code 20011</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-73106</p> <p>Date of Disbursement 07 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1099.43</p>

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

13099.43

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Nalinee Darmrong	Transaction ID: SB23-73111 Date of Disbursement 07 / 31 / 2009
	Mailing Address 5511 Blair Road, NE	Amount of Each Disbursement this Period 1099.43
	City Washington State DC Zip Code 20011	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Nalinee Darmrong	Transaction ID: SB23-73116 Date of Disbursement 08 / 15 / 2009
	Mailing Address 5511 Blair Road, NE	Amount of Each Disbursement this Period 1099.43
	City Washington State DC Zip Code 20011	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Nalinee Darmrong	Transaction ID: SB23-73123 Date of Disbursement 08 / 31 / 2009
	Mailing Address 5511 Blair Road, NE	Amount of Each Disbursement this Period 1099.43
	City Washington State DC Zip Code 20011	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3298.29
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Nalinee Darmrong	Transaction ID: SB23-73555 Date of Disbursement 09 / 15 / 2009
	Mailing Address 5511 Blair Road, NE	Amount of Each Disbursement this Period 1099.43
	City Washington State DC Zip Code 20011	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Nalinee Darmrong	Transaction ID: SB23-73559 Date of Disbursement 09 / 30 / 2009
	Mailing Address 5511 Blair Road, NE	Amount of Each Disbursement this Period 1099.43
	City Washington State DC Zip Code 20011	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DC Dept of Employment	Transaction ID: SB23-73147 Date of Disbursement 07 / 31 / 2009
	Mailing Address Unemployment Compensation Post Office Box 96664	Amount of Each Disbursement this Period 42.50
	City Washington State DC Zip Code 20090	
	Purpose of Disbursement Taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2241.36
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) DC Dept of Employment	Transaction ID: SB23-73159 Date of Disbursement 08 / 15 / 2009
	Mailing Address: Unemployment Compensation Post Office Box 96664	Amount of Each Disbursement this Period 17.65
	City: Washington State: DC Zip Code: 20090	
	Purpose of Disbursement: Taxes Candidate Name: _____	Category/Type: _____
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: _____ District: _____	

B.	Full Name (Last, First, Middle Initial) DC Office Of Tax and Revenue	Transaction ID: SB23-73138 Date of Disbursement 07 / 15 / 2009
	Mailing Address: Post Office Box 7792 Ben Franklin Station	Amount of Each Disbursement this Period 767.70
	City: Washington State: DC Zip Code: 20044	
	Purpose of Disbursement: Taxes Candidate Name: _____	Category/Type: _____
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: _____ District: _____	

C.	Full Name (Last, First, Middle Initial) DC Office Of Tax and Revenue	Transaction ID: SB23-73141 Date of Disbursement 07 / 15 / 2009
	Mailing Address: Post Office Box 7792 Ben Franklin Station	Amount of Each Disbursement this Period 42.50
	City: Washington State: DC Zip Code: 20044	
	Purpose of Disbursement: Taxes Candidate Name: _____	Category/Type: _____
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: _____ District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>827.85</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) DC Office Of Tax and Revenue	Transaction ID: SB23-73144 Date of Disbursement
	Mailing Address Post Office Box 7792 Ben Franklin Station	<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="1652.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) DC Office Of Tax and Revenue	Transaction ID: SB23-73156 Date of Disbursement
	Mailing Address Post Office Box 7792 Ben Franklin Station	<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="367.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) DC Office Of Tax and Revenue	Transaction ID: SB23-73161 Date of Disbursement
	Mailing Address Post Office Box 7792 Ben Franklin Station	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="356.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2377.10"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) DC Office Of Tax and Revenue	Transaction ID: SB23-73551 Date of Disbursement
	Mailing Address Post Office Box 7792 Ben Franklin Station	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="367.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DC Office Of Tax and Revenue	Transaction ID: SB23-73545 Date of Disbursement
	Mailing Address Post Office Box 7792 Ben Franklin Station	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="356.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) De Lage Landen	Transaction ID: SB23-73012 Date of Disbursement
	Mailing Address Post Office Box 41602	<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Philadelphia State PA Zip Code 19101-1602	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment	<input type="text" value="393.12"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1117.52"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Garrett Dee  Mailing Address 4685 Baywood Ln  City State Zip Code Beaumont TX 77706  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72965 Date of Disbursement 07 / 24 / 2009  Amount of Each Disbursement this Period -75.00  Prior Period Void 3/2/08
B.	Full Name (Last, First, Middle Initial) Deer Park  Mailing Address Post Office Box 856192  City State Zip Code Louisville KY 40285-6192  Purpose of Disbursement Food & Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72931 Date of Disbursement 07 / 20 / 2009  Amount of Each Disbursement this Period 64.61
C.	Full Name (Last, First, Middle Initial) Deer Park  Mailing Address Post Office Box 856192  City State Zip Code Louisville KY 40285-6192  Purpose of Disbursement Food & Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73451 Date of Disbursement 09 / 30 / 2009  Amount of Each Disbursement this Period 25.02

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

14.63

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Democratic Women of Bernalillo County Mailing Address 2528 Kelly Avenue, S.W. City Albuquerque State NM Zip Code 87105 Purpose of Disbursement Event Expense: Catering/Venue Candidate Name	Transaction ID: SB23-73090 Date of Disbursement 08 / 28 / 2009
	Amount of Each Disbursement this Period -50.00 Prior Period Void 8/22/07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Democratic Women of Bernalillo County Mailing Address 2528 Kelly Avenue, S.W. City Albuquerque State NM Zip Code 87105 Purpose of Disbursement Event Expense: Catering/Venue Candidate Name	Transaction ID: SB23-73128 Date of Disbursement 08 / 28 / 2009
	Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 002

<b>C.</b> Full Name (Last, First, Middle Initial) Distinctive Gourmet Mailing Address 200 Civic Center Drive City Charleston State WV Zip Code 25301 Purpose of Disbursement Event Expense: Catering/Venue Candidate Name	Transaction ID: SB23-72939 Date of Disbursement 07 / 24 / 2009
	Amount of Each Disbursement this Period -1070.38 Prior Period Void 06/30/08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-1070.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Dunn Beach Boogie BBQ Festival  Mailing Address 710 13th Avenue North  City State Zip Code Surfside Beach SC 29575  Purpose of Disbursement Event Expense: Catering/Venue Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73091 Date of Disbursement <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>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-70.00</td> </tr> </table> Prior Period Void 8/22/07	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	9		-70.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	8		2	0	9															
-70.00																							
B.	Full Name (Last, First, Middle Initial) El Diario Paso Del Norte Publishing, Inc.  Mailing Address 1801 Texas Ave.  City State Zip Code El Paso TX 79901  Purpose of Disbursement Printing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72940 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-2520.00</td> </tr> </table> Prior Period Void 06/30/08	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	4		2	0	9		-2520.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	4		2	0	9															
-2520.00																							
C.	Full Name (Last, First, Middle Initial) Electronic Transaction Systems  Mailing Address 10 Pidgeon Hill Drive  City State Zip Code Sterling VA 20165  Purpose of Disbursement Credit Card Process Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73214 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">32.50</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	9		32.50
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	2		2	0	9															
32.50																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td style="font-size: 1.2em;">-2557.50</td> </tr> </table>	-2557.50
-2557.50		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td style="height: 20px;"> </td> </tr> </table>	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A. Electronic Transaction Systems	Full Name (Last, First, Middle Initial)	Transaction ID: SB23-73217	
	Mailing Address 10 Pidgeon Hill Drive	Date of Disbursement 07 / 02 / 2009	
	City Sterling State VA Zip Code 20165	Amount of Each Disbursement this Period 32.50	
	Purpose of Disbursement Credit Card Process Fee	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

B. Electronic Transaction Systems	Full Name (Last, First, Middle Initial)	Transaction ID: SB23-73215	
	Mailing Address 10 Pidgeon Hill Drive	Date of Disbursement 08 / 04 / 2009	
	City Sterling State VA Zip Code 20165	Amount of Each Disbursement this Period 32.50	
	Purpose of Disbursement Credit Card Process Fee	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

C. Electronic Transaction Systems	Full Name (Last, First, Middle Initial)	Transaction ID: SB23-73219	
	Mailing Address 10 Pidgeon Hill Drive	Date of Disbursement 08 / 04 / 2009	
	City Sterling State VA Zip Code 20165	Amount of Each Disbursement this Period 32.50	
	Purpose of Disbursement Credit Card Process Fee	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **97.50**

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A. Electronic Transaction Systems	Full Name (Last, First, Middle Initial)	Transaction ID: SB23-73216	
	Mailing Address 10 Pidgeon Hill Drive	Date of Disbursement 08 / 11 / 2009	
	City Sterling State VA Zip Code 20165	Amount of Each Disbursement this Period 84.00	
	Purpose of Disbursement Credit Card Process Fee	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

B. Electronic Transaction Systems	Full Name (Last, First, Middle Initial)	Transaction ID: SB23-73218	
	Mailing Address 10 Pidgeon Hill Drive	Date of Disbursement 08 / 11 / 2009	
	City Sterling State VA Zip Code 20165	Amount of Each Disbursement this Period 84.00	
	Purpose of Disbursement Credit Card Process Fee	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

C. Electronic Transaction Systems	Full Name (Last, First, Middle Initial)	Transaction ID: SB23-73532	
	Mailing Address 10 Pidgeon Hill Drive	Date of Disbursement 09 / 02 / 2009	
	City Sterling State VA Zip Code 20165	Amount of Each Disbursement this Period 32.50	
	Purpose of Disbursement Credit Card Process Fee	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>200.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Electronic Transaction Systems <hr/> Mailing Address 10 Pidgeon Hill Drive <hr/> City Sterling State VA Zip Code 20165 <hr/> Purpose of Disbursement Credit Card Process Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73533 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 32.50
B.	Full Name (Last, First, Middle Initial) Embassy Suites DC Convention Center <hr/> Mailing Address 900 10th Street, N.W. <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Event Expense: Catering/Venue Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73049 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -2445.75 <hr/> Prior Period Void 02/15/08
C.	Full Name (Last, First, Middle Initial) Europ Assistance USA, Inc. <hr/> Mailing Address 4330 East West Highway Suite 1000 <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73060 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 3098.60

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>685.35</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Europ Assistance USA, Inc.

Transaction ID: SB23-73061  
Date of Disbursement

Mailing Address 4330 East West Highway  
Suite 1000

/   /

City Bethesda State MD Zip Code 20814

Amount of Each Disbursement this Period

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Europ Assistance USA, Inc.

Transaction ID: SB23-73452  
Date of Disbursement

Mailing Address 4330 East West Highway  
Suite 1000

/   /

City Bethesda State MD Zip Code 20814

Amount of Each Disbursement this Period

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Evans Equipment Company

Transaction ID: SB23-73048  
Date of Disbursement

Mailing Address 601 Railroad Avenue

/   /

City Glenwood State IA Zip Code 51534

Amount of Each Disbursement this Period

Purpose of Disbursement  
Event Expense: Equipment

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 02/11/08

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Excel Micro	Transaction ID: SB23-73015 Date of Disbursement 08 / 07 / 2009
	Mailing Address 505 Kedron Avenue	Amount of Each Disbursement this Period 75.48
	City Folsom State PA Zip Code 19033	
	Purpose of Disbursement Internet Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Excel Micro	Transaction ID: SB23-73062 Date of Disbursement 08 / 24 / 2009
	Mailing Address 505 Kedron Avenue	Amount of Each Disbursement this Period 96.20
	City Folsom State PA Zip Code 19033	
	Purpose of Disbursement Internet Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Excel Micro	Transaction ID: SB23-73453 Date of Disbursement 09 / 30 / 2009
	Mailing Address 505 Kedron Avenue	Amount of Each Disbursement this Period 96.20
	City Folsom State PA Zip Code 19033	
	Purpose of Disbursement Internet Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>267.88</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) E2, Inc.	Transaction ID: SB23-73000
	Mailing Address 921 2nd Street, SE	Date of Disbursement 08 / 07 / 2009
	City Charlottesville State VA Zip Code 22902	Amount of Each Disbursement this Period -75.00
	Purpose of Disbursement Rent	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Prior Period Void 2/11/08
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) E2, Inc.	Transaction ID: SB23-73030
	Mailing Address 921 2nd Street, SE	Date of Disbursement 08 / 07 / 2009
	City Charlottesville State VA Zip Code 22902	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Rent	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) GELCO Management & Developers, LLC	Transaction ID: SB23-73098
	Mailing Address Post Office Box 1305	Date of Disbursement 08 / 28 / 2009
	City Vienna State IL Zip Code 62995	Amount of Each Disbursement this Period 800.00
	Purpose of Disbursement Rent	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Hollywood Studio Gallery, Inc.	Transaction ID: SB23-73055 Date of Disbursement 08 / 07 / 2009
	Mailing Address 1035 North Cahuenga Boulevard	Amount of Each Disbursement this Period -487.13
	City Hollywood State CA Zip Code 90038	
	Purpose of Disbursement Event Expense: Equipment	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Prior Period Void 6/30/08
	State: District:	

B.	Full Name (Last, First, Middle Initial) IAMAW	Transaction ID: SB23-72967 Date of Disbursement 07 / 28 / 2009
	Mailing Address 7711 Clifford Street	Amount of Each Disbursement this Period -700.00
	City Fort Worth State TX Zip Code 76108	
	Purpose of Disbursement Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Prior Period Void 02/14/08
	State: District:	

C.	Full Name (Last, First, Middle Initial) IAMAW	Transaction ID: SB23-72986 Date of Disbursement 07 / 31 / 2009
	Mailing Address 7711 Clifford Street	Amount of Each Disbursement this Period 700.00
	City Fort Worth State TX Zip Code 76108	
	Purpose of Disbursement Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	-487.13
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) IBEW Local Union 5 Training Facility <hr/> Mailing Address 420 N Craig Street <hr/> City Pittsburgh State PA Zip Code 12513 <hr/> Purpose of Disbursement Event Expense: Equipment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72973 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period -490.00
	Category/ Type
	Prior Period Void 6/30/08
<b>B.</b> Full Name (Last, First, Middle Initial) Indiana Department of Revenue <hr/> Mailing Address Post Office Box 6192 <hr/> City Indianapolis State IN Zip Code 46206-6192 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72919 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 668.43
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Indiana Department of Revenue <hr/> Mailing Address Post Office Box 6192 <hr/> City Indianapolis State IN Zip Code 46206-6192 <hr/> Purpose of Disbursement Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73177 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 748.94
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>927.37</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Inn On The Blue Horizon Mailing Address Post Office Box 1556 City Vieques Island State PR Zip Code 00765 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-73094 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period -200.00 Prior Period Void 6/30/08
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Inn On The Blue Horizon Mailing Address Post Office Box 1556 City Vieques Island State PR Zip Code 00765 Purpose of Disbursement Food & Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-73095 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period -230.53 Prior Period Void 6/30/08
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Service Center City Ogden State UT Zip Code 84201 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-73135 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 3415.87
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2985.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 263

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: SB23-73136 Date of Disbursement
	Mailing Address Service Center	<input type="text" value="07"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ogden State UT Zip Code 84201	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="2881.49"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: SB23-73137 Date of Disbursement
	Mailing Address Service Center	<input type="text" value="07"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ogden State UT Zip Code 84201	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="22.67"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: SB23-73142 Date of Disbursement
	Mailing Address Service Center	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ogden State UT Zip Code 84201	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="6682.35"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9586.51"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Internal Revenue Service			<b>Transaction ID:</b> SB23-73143 Date of Disbursement 07 / 31 / 2009		
	Mailing Address      Service Center			Amount of Each Disbursement this Period 0.08		
	City Ogden		State UT			
	Purpose of Disbursement Taxes			Category/ Type		
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State:      District:			Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
<b>B.</b>	Full Name (Last, First, Middle Initial) Internal Revenue Service			<b>Transaction ID:</b> SB23-73148 Date of Disbursement 07 / 31 / 2009		
	Mailing Address      Service Center			Amount of Each Disbursement this Period 4476.92		
	City Ogden		State UT			
	Purpose of Disbursement Taxes			Category/ Type		
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State:      District:			Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
<b>C.</b>	Full Name (Last, First, Middle Initial) Internal Revenue Service			<b>Transaction ID:</b> SB23-73154 Date of Disbursement 08 / 15 / 2009		
	Mailing Address      Service Center			Amount of Each Disbursement this Period 2101.97		
	City Ogden		State UT			
	Purpose of Disbursement Taxes			Category/ Type		
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State:      District:			Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

6578.97

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



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 105 / 263

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address      Service Center City    State                          Zip Code Ogden    UT    84201 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House                          Disbursement For:                          2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                          District:	<b>Transaction ID:</b> SB23-73155 Date of Disbursement <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>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	8		1	5		2	0	0	9											
	Amount of Each Disbursement this Period <table border="1"> <tr><td>2065.49</td></tr> </table>		2065.49																		
	2065.49																				
Category/ Type																					
Category/ Type																					
<b>B.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address      Service Center City    State                          Zip Code Ogden    UT    84201 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House                          Disbursement For:                          2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                          District:	<b>Transaction ID:</b> SB23-73160 Date of Disbursement <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>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	8		3	1		2	0	0	9											
	Amount of Each Disbursement this Period <table border="1"> <tr><td>2072.10</td></tr> </table>		2072.10																		
	2072.10																				
Category/ Type																					
Category/ Type																					
<b>C.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address      Service Center City    State                          Zip Code Ogden    UT    84201 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House                          Disbursement For:                          2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                          District:	<b>Transaction ID:</b> SB23-73164 Date of Disbursement <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>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	8		3	1		2	0	0	9											
	Amount of Each Disbursement this Period <table border="1"> <tr><td>2047.21</td></tr> </table>		2047.21																		
	2047.21																				
Category/ Type																					
Category/ Type																					

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

**6184.80**

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

### Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service  Mailing Address     Service Center  City    State                          Zip Code Ogden    UT    84201 Purpose of Disbursement Taxes Candidate Name  Office Sought: <input type="checkbox"/> House                          Disbursement For:     2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                          District:	Transaction ID: SB23-73548 Date of Disbursement <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>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">2101.97</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	9	2101.97
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	9														
2101.97																							
B.	Full Name (Last, First, Middle Initial) Internal Revenue Service  Mailing Address     Service Center  City    State                          Zip Code Ogden    UT    84201 Purpose of Disbursement Taxes Candidate Name  Office Sought: <input type="checkbox"/> House                          Disbursement For:     2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                          District:	Transaction ID: SB23-73549 Date of Disbursement <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>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">2065.49</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	9	2065.49
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	9														
2065.49																							
C.	Full Name (Last, First, Middle Initial) Internal Revenue Service  Mailing Address     Service Center  City    State                          Zip Code Ogden    UT    84201 Purpose of Disbursement Taxes Candidate Name  Office Sought: <input type="checkbox"/> House                          Disbursement For:     2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                          District:	Transaction ID: SB23-73543 Date of Disbursement <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>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">2072.10</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	9	2072.10
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		3	0		2	0	0	9														
2072.10																							

SUBTOTAL of Disbursements This Page (optional) .....	<b>6239.56</b>
TOTAL This Period (last page this line number only) .....	

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
Internal Revenue Service

Mailing Address Service Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23-73544  
**Date of Disbursement:** 09 / 30 / 2009

Amount of Each Disbursement this Period: 2047.21

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
Iowa City Pride Committee

Mailing Address 130 North Madison Street

City Iowa City State IA Zip Code 52242

Purpose of Disbursement Event Expense: Catering/Venue

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23-73092  
**Date of Disbursement:** 08 / 28 / 2009

Amount of Each Disbursement this Period: -50.00

Prior Period Void 7/6/07

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
Iowa City Pride Committee

Mailing Address 130 North Madison Street

City Iowa City State IA Zip Code 52242

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23-73130  
**Date of Disbursement:** 08 / 28 / 2009

Amount of Each Disbursement this Period: 50.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 2047.21

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Iowa State University

Mailing Address 195 General Services  
Wallace Road

City Ames State IA Zip Code 50011

Purpose of Disbursement  
Event Expense: Catering/Venue

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73045  
Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

-69.12

Prior Period Void 11/26/07

B.

Full Name (Last, First, Middle Initial)  
Jefferson Street Strateg., LLC

Mailing Address 428 Jefferson Street, N.W.

City Washington State DC Zip Code 20011

Purpose of Disbursement  
Consulting/Website

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73016  
Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)  
Johnson & Markley Redevelopment, LP

Mailing Address 204 Harding Avenue

City Bellmawr State NJ Zip Code 08031

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73071  
Date of Disbursement

08 / 27 / 2009

Amount of Each Disbursement this Period

-1187.10

Prior Period Void 03/25/08

SUBTOTAL of Disbursements This Page (optional) ▶

-756.22

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

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Johnson & Markley Redevelopment, LP	Transaction ID: SB23-73104
	Mailing Address 204 Harding Avenue	Date of Disbursement 08 / 28 / 2009
	City Bellmawr State NJ Zip Code 08031	Amount of Each Disbursement this Period 1187.10
	Purpose of Disbursement Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Kentucky State Treasurer Kentucky Department of Revenue	Transaction ID: SB23-72997
	Mailing Address Post Office Box 181 Station 57	Date of Disbursement 08 / 07 / 2009
	City Frankfort State KY Zip Code 40602-0181	Amount of Each Disbursement this Period -29.79
	Purpose of Disbursement Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

Prior Period Void 2/5/08

C.	Full Name (Last, First, Middle Initial) Kentucky State Treasurer Kentucky Department of Revenue	Transaction ID: SB23-73007
	Mailing Address Post Office Box 181 Station 57	Date of Disbursement 08 / 07 / 2009
	City Frankfort State KY Zip Code 40602-0181	Amount of Each Disbursement this Period 29.79
	Purpose of Disbursement Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1187.10
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Kentucky State Treasurer Kentucky Department of Revenue	Transaction ID: SB23-73008 Date of Disbursement 08 / 07 / 2009
	Mailing Address Post Office Box 181 Station 57	Amount of Each Disbursement this Period 335.00
	City Frankfort State KY Zip Code 40602-0181	
	Purpose of Disbursement Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Laborers Local #329	Transaction ID: SB23-73001 Date of Disbursement 08 / 07 / 2009
	Mailing Address 4580 South Dixie Highway	Amount of Each Disbursement this Period -200.00
	City Lima State OH Zip Code 45806	
	Purpose of Disbursement Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Prior Period Void 2/20/08
	State: District:	

C.	Full Name (Last, First, Middle Initial) Laborers Local #329	Transaction ID: SB23-73031 Date of Disbursement 08 / 07 / 2009
	Mailing Address 4580 South Dixie Highway	Amount of Each Disbursement this Period 200.00
	City Lima State OH Zip Code 45806	
	Purpose of Disbursement Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	335.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Lake Charles Civic Center

Mailing Address 900 Lakeshore Drive

City State Zip Code  
Lake Charles LA 70601

Purpose of Disbursement  
Event Expense: Equipment

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-72941  
Date of Disbursement

07 / 24 / 2009

Amount of Each Disbursement this Period

-550.00

Prior Period Void 06/30/08

B.

Full Name (Last, First, Middle Initial)  
Josh Locklear

Mailing Address 2187 Preston Road

City State Zip Code  
Pembroke NC 28372

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-72960  
Date of Disbursement

07 / 28 / 2009

Amount of Each Disbursement this Period

-200.00

Prior Period Void 5/4/08

C.

Full Name (Last, First, Middle Initial)  
Shauna Locklear

Mailing Address 219 Path Road

City State Zip Code  
Fairmont NC 28340

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-72959  
Date of Disbursement

07 / 28 / 2009

Amount of Each Disbursement this Period

-200.00

Prior Period Void 5/4/08

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

-950.00

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

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Sierra Locklear  Mailing Address 89 Pine Tree Drive  City Lumberton State NC Zip Code 28358  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-72961 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period -200.00  Prior Period Void 5/4/08
<b>B.</b>	Full Name (Last, First, Middle Initial) M & M Golf Cars  Mailing Address 5727 Northeast 16th Street  City Des Moines State IA Zip Code 50313  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73044 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period -371.00  Prior Period Void 10/3/07
<b>C.</b>	Full Name (Last, First, Middle Initial) Markham Group, LLC  Mailing Address 823 West Markham Street Suite 202  City Little Rock State AR Zip Code 72201  Purpose of Disbursement Consulting/ Trip Planning Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-72979 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 9  Amount of Each Disbursement this Period -666.67  Prior Period Void 12/8/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-1237.67
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Markham Group, LLC</p> <p>Mailing Address 823 West Markham Street Suite 202</p> <p>City Little Rock State AR Zip Code 72201</p> <p>Purpose of Disbursement Consulting/ Trip Planning</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB23-72984</p> <p>Date of Disbursement 07 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 666.67</p> <p>Category/ Type 002</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Capricia Marshall</p> <p>Mailing Address 4703 Windom Place, NW</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB23-73107</p> <p>Date of Disbursement 07 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 3211.43</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Capricia Marshall</p> <p>Mailing Address 4703 Windom Place, NW</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB23-73112</p> <p>Date of Disbursement 07 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 8759.40</p> <p>Category/ Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>12637.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Maryland Comp of Treasury	Transaction ID: SB23-73139 Date of Disbursement
	Mailing Address Revenue Admin Division	<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Annapolis State MD Zip Code 21411	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="523.38"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Maryland Comp of Treasury	Transaction ID: SB23-73145 Date of Disbursement
	Mailing Address Revenue Admin Division	<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Annapolis State MD Zip Code 21411	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="523.38"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Maryland Comp of Treasury	Transaction ID: SB23-73157 Date of Disbursement
	Mailing Address Revenue Admin Division	<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Annapolis State MD Zip Code 21411	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="523.38"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1570.14"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 263

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.**

Full Name (Last, First, Middle Initial)  
Maryland Comp of Treasury

Mailing Address Revenue Admin Division

City Annapolis State MD Zip Code 21411

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23-73162  
**Date of Disbursement:** 08 / 31 / 2009

Amount of Each Disbursement this Period: 523.38

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Maryland Comp of Treasury

Mailing Address Revenue Admin Division

City Annapolis State MD Zip Code 21411

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23-73550  
**Date of Disbursement:** 09 / 15 / 2009

Amount of Each Disbursement this Period: 523.38

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
Maryland Comp of Treasury

Mailing Address Revenue Admin Division

City Annapolis State MD Zip Code 21411

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23-73546  
**Date of Disbursement:** 09 / 30 / 2009

Amount of Each Disbursement this Period: 523.38

Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1570.14</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Mayfield Strategy Group LLC <hr/> Mailing Address 961 Ilima Way <hr/> City Palo Alto State CA Zip Code 94306 <hr/> Purpose of Disbursement Consulting/Website Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-72920 Date of Disbursement 07 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 5337.50
B.	Full Name (Last, First, Middle Initial) Mayfield Strategy Group LLC <hr/> Mailing Address 961 Ilima Way <hr/> City Palo Alto State CA Zip Code 94306 <hr/> Purpose of Disbursement Website Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-72921 Date of Disbursement 07 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) Mayfield Strategy Group LLC <hr/> Mailing Address 961 Ilima Way <hr/> City Palo Alto State CA Zip Code 94306 <hr/> Purpose of Disbursement Website Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-72922 Date of Disbursement 07 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 17.00

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

**7854.50**

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Mayfield Strategy Group LLC <hr/> Mailing Address 961 Ilima Way <hr/> City Palo Alto State CA Zip Code 94306 <hr/> Purpose of Disbursement Consulting/Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73063 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 4175.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Mayfield Strategy Group LLC <hr/> Mailing Address 961 Ilima Way <hr/> City Palo Alto State CA Zip Code 94306 <hr/> Purpose of Disbursement Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73064 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2678.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Mayfield Strategy Group LLC <hr/> Mailing Address 961 Ilima Way <hr/> City Palo Alto State CA Zip Code 94306 <hr/> Purpose of Disbursement Consulting/Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73178 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 875.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7728.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Mayfield Strategy Group LLC <hr/> Mailing Address 961 Ilima Way <hr/> City Palo Alto State CA Zip Code 94306 <hr/> Purpose of Disbursement Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73179 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2508.80
<b>B.</b>	Full Name (Last, First, Middle Initial) MBD Partnership, LLC <hr/> Mailing Address 114 S Walnut Street <hr/> City Muncie State IN Zip Code 47305 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73002 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -750.00 <hr/> Prior Period Void 4/3/08
<b>C.</b>	Full Name (Last, First, Middle Initial) MBD Partnership, LLC <hr/> Mailing Address 114 S Walnut Street <hr/> City Muncie State IN Zip Code 47305 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73032 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 750.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2508.80
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Kelly Mehlenbacher <hr/> Mailing Address 5597 Seminary Road Apartment 12105 <hr/> City Falls Church State VA Zip Code 22041 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-73108 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1068.84
<b>B.</b>	Full Name (Last, First, Middle Initial) Kelly Mehlenbacher <hr/> Mailing Address 5597 Seminary Road Apartment 12105 <hr/> City Falls Church State VA Zip Code 22041 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-73113 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1068.84
<b>C.</b>	Full Name (Last, First, Middle Initial) Kelly Mehlenbacher <hr/> Mailing Address 5597 Seminary Road Apartment 12105 <hr/> City Falls Church State VA Zip Code 22041 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-73117 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1068.84

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3206.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Kelly Mehlenbacher</p> <p>Mailing Address 5597 Seminary Road Apartment 12105</p> <p>City Falls Church State VA Zip Code 22041</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-73124</p> <p>Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1068.84</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Kelly Mehlenbacher</p> <p>Mailing Address 5597 Seminary Road Apartment 12105</p> <p>City Falls Church State VA Zip Code 22041</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-73556</p> <p>Date of Disbursement 09 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1068.84</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kelly Mehlenbacher</p> <p>Mailing Address 5597 Seminary Road Apartment 12105</p> <p>City Falls Church State VA Zip Code 22041</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-73560</p> <p>Date of Disbursement 09 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1068.84</p>

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

3206.52

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



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Merkle Response Services, Inc.  Mailing Address 100 Jamison Court  City Hagerstown State MD Zip Code 21740  Purpose of Disbursement Contribution Processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72923 Date of Disbursement 07 / 17 / 2009  Amount of Each Disbursement this Period 259.68
B.	Full Name (Last, First, Middle Initial) Merkle Response Services, Inc.  Mailing Address 100 Jamison Court  City Hagerstown State MD Zip Code 21740  Purpose of Disbursement Contribution Processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73065 Date of Disbursement 08 / 24 / 2009  Amount of Each Disbursement this Period 274.74
C.	Full Name (Last, First, Middle Initial) Merkle Response Services, Inc.  Mailing Address 100 Jamison Court  City Hagerstown State MD Zip Code 21740  Purpose of Disbursement Contribution Processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73454 Date of Disbursement 09 / 30 / 2009  Amount of Each Disbursement this Period 93.63

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

**628.05**

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

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Minnesota Revenue  Mailing Address Post Office Box 64649  City State Zip Code St. Paul MN 55164-0649  Purpose of Disbursement Taxes  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73066 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 1245.40
B.	Full Name (Last, First, Middle Initial) Minnesota Secretary of State Bus Svcs, Retirement Syst of MN  Mailing Address 60 Empire Drive Number 100  City State Zip Code St. Paul MN 55103  Purpose of Disbursement Registration Fees  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73168 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9  Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) Mississippi Secretary of State  Mailing Address Post Office Box 136  City State Zip Code Jackson MS 39205-0136  Purpose of Disbursement Registration Fees  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73169 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9  Amount of Each Disbursement this Period 25.00

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

1320.40

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

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Missouri Secretary of State Corporations Division	Transaction ID: SB23-73170 Date of Disbursement 09 / 08 / 2009
	Mailing Address 600 West Main Street Room 322	Amount of Each Disbursement this Period 10.00
	City Jefferson City State MO Zip Code 65102	
	Purpose of Disbursement Registration Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Modoc County Elections Dept.	Transaction ID: SB23-72942 Date of Disbursement 07 / 24 / 2009
	Mailing Address 204 South Court Street	Amount of Each Disbursement this Period -112.00
	City Alturas State CA Zip Code 96101	
	Purpose of Disbursement List Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Prior Period Void 06/30/08

C.	Full Name (Last, First, Middle Initial) Montgomery Cty Historical Soc.	Transaction ID: SB23-73093 Date of Disbursement 08 / 28 / 2009
	Mailing Address 2700 North 4th Street	Amount of Each Disbursement this Period -75.00
	City Red Oak State IA Zip Code 51566	
	Purpose of Disbursement Event Expense: Catering/Venue Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Prior Period Void 5/4/07

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-177.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Montgomery Cty Historical Soc.

Transaction ID: SB23-73129

Mailing Address 2700 North 4th Street

Date of Disbursement

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

City State Zip Code  
Red Oak IA 51566

Amount of Each Disbursement this Period

75.00
-------

Purpose of Disbursement  
Event Expense: Catering/Venue  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
Shelly Moskwa

Transaction ID: SB23-73109

Mailing Address 120 Grafton Street

Date of Disbursement

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

City State Zip Code  
Chevy Chase MD 20815

Amount of Each Disbursement this Period

4388.64
---------

Purpose of Disbursement  
Salary  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Shelly Moskwa

Transaction ID: SB23-73114

Mailing Address 120 Grafton Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	9

City State Zip Code  
Chevy Chase MD 20815

Amount of Each Disbursement this Period

4388.64
---------

Purpose of Disbursement  
Salary  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

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

8852.28

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Shelly Moskwa  Mailing Address 120 Grafton Street  City Chevy Chase State MD Zip Code 20815  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: SB23-73118 Date of Disbursement 08 / 15 / 2009  Amount of Each Disbursement this Period 4388.64  Category/Type
B.	Full Name (Last, First, Middle Initial) Shelly Moskwa  Mailing Address 120 Grafton Street  City Chevy Chase State MD Zip Code 20815  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: SB23-73125 Date of Disbursement 08 / 31 / 2009  Amount of Each Disbursement this Period 4388.64  Category/Type
C.	Full Name (Last, First, Middle Initial) Shelly Moskwa  Mailing Address 120 Grafton Street  City Chevy Chase State MD Zip Code 20815  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: SB23-73553 Date of Disbursement 09 / 15 / 2009  Amount of Each Disbursement this Period 4388.64  Category/Type

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

13165.92

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

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Shelly Moskwa	Transaction ID: SB23-73557
	Mailing Address 120 Grafton Street	Date of Disbursement 09 / 30 / 2009
	City Chevy Chase State MD Zip Code 20815	Amount of Each Disbursement this Period 4388.64
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Myrtle Beach Chamber of Commerce	Transaction ID: SB23-73134
	Mailing Address 1200 North Oak Street	Date of Disbursement 08 / 28 / 2009
	City Myrtle Beach State SC Zip Code 29577	Amount of Each Disbursement this Period 70.00
	Purpose of Disbursement Event Expense: Catering/Venue Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Nancy Jacobson Consulting, Inc	Transaction ID: SB23-72991
	Mailing Address 1070 Thomas Jefferson St., N.W Suite 202	Date of Disbursement 08 / 07 / 2009
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period -79.27
	Purpose of Disbursement Telephone Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	Prior Period Void 12/3/07

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4379.37</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Nancy Jacobson Consulting, Inc  Mailing Address 1070 Thomas Jefferson St., N.W. Suite 202  City Washington State DC Zip Code 20007  Purpose of Disbursement Consulting/ Fundraising  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> SB23-72992 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period -3500.00  Prior Period Void 12/3/07
<b>B.</b>	Full Name (Last, First, Middle Initial) Nancy Jacobson Consulting, Inc  Mailing Address 1070 Thomas Jefferson St., N.W. Suite 202  City Washington State DC Zip Code 20007  Purpose of Disbursement Telephone Service  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> SB23-72993 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period -183.93  Prior Period Void 12/3/07
<b>C.</b>	Full Name (Last, First, Middle Initial) Nancy Jacobson Consulting, Inc  Mailing Address 1070 Thomas Jefferson St., N.W. Suite 202  City Washington State DC Zip Code 20007  Purpose of Disbursement Event Supplies  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> SB23-72994 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period -333.18  Prior Period Void 12/3/07

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-4017.11
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
Nancy Jacobson Consulting, Inc

Mailing Address 1070 Thomas Jefferson St., N.W.  
Suite 202

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73033

Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

79.27

**B.** Full Name (Last, First, Middle Initial)  
Nancy Jacobson Consulting, Inc

Mailing Address 1070 Thomas Jefferson St., N.W.  
Suite 202

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Consulting/ Fundraising

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73034

Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

3500.00

**C.** Full Name (Last, First, Middle Initial)  
Nancy Jacobson Consulting, Inc

Mailing Address 1070 Thomas Jefferson St., N.W.  
Suite 202

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73035

Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

183.93

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

3763.20

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



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Nancy Jacobson Consulting, Inc <hr/> Mailing Address 1070 Thomas Jefferson St., N.W. Suite 202 <hr/> City Washington State DC Zip Code 20007 <hr/> Purpose of Disbursement Event Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73036 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 333.18
B.	Full Name (Last, First, Middle Initial) National Construction Rentals <hr/> Mailing Address 52 South 3rd Street <hr/> City Fernwood State PA Zip Code 19050 <hr/> Purpose of Disbursement Event Expense: Equipment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72943 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -3124.51 <hr/> Prior Period Void 06/30/08
C.	Full Name (Last, First, Middle Initial) National Construction Rentals Inc. <hr/> Mailing Address Post Office 4503 <hr/> City Pacoima State CA Zip Code 91333 <hr/> Purpose of Disbursement Event Expense: Equipment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72953 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -1500.00 <hr/> Prior Period Void 6/30/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>-4291.33</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Nevada County Clerk-Recorder Registrar of Voters <hr/> Mailing Address 950 Maidu Avenue <hr/> City Nevada City State CA Zip Code 95959 <hr/> Purpose of Disbursement List Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73046 Date of Disbursement 08 / 07 / 2009 <hr/> Amount of Each Disbursement this Period -150.00 <hr/> Prior Period Void 01/22/08
B.	Full Name (Last, First, Middle Initial) Nevada Secretary of State <hr/> Mailing Address 204 North Carson Street Suite 1 <hr/> City Carson City State NV Zip Code 89701-4520 <hr/> Purpose of Disbursement Registration Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73171 Date of Disbursement 09 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) New York State Dept. of Tax & Finance - Corp. Tax Bureau <hr/> Mailing Address State Campus <hr/> City Albany State NY Zip Code 12227 <hr/> Purpose of Disbursement Registration Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73173 Date of Disbursement 09 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 30.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-70.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) New York State Unemployment Insurance	Transaction ID: SB23-72797 Date of Disbursement
	Mailing Address Post Office Box 4301	<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Binghamton State NY Zip Code 13902-4301	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="277.49"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NGP Software, Inc	Transaction ID: SB23-73017 Date of Disbursement
	Mailing Address 1225 Eye Street, N.W. Suite 1225	<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting/ Technology	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) North Carolina Secretary of St Corporations Division	Transaction ID: SB23-73174 Date of Disbursement
	Mailing Address Post Office Box 29622	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Raleigh State NC Zip Code 27626-0622	Amount of Each Disbursement this Period
	Purpose of Disbursement Registration Fees	<input type="text" value="25.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5302.49"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
NOW Valet Service, Inc.

Transaction ID: SB23-72969  
Date of Disbursement

Mailing Address Post Office Box 44172

/   /

City Cleveland State OH Zip Code 44144

Amount of Each Disbursement this Period

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Prior Period Void 06/30/08

State: District:

B.

Full Name (Last, First, Middle Initial)  
Offices of Luther Boykins

Transaction ID: SB23-73078  
Date of Disbursement

Mailing Address 4135 Shreve Road

/   /

City St. Louis State MO Zip Code 63115

Amount of Each Disbursement this Period

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Prior Period Void 02/02/08

State: District:

C.

Full Name (Last, First, Middle Initial)  
Otto

Transaction ID: SB23-72944  
Date of Disbursement

Mailing Address 2 E Main St

/   /

City Carpentersville State IL Zip Code 60110

Amount of Each Disbursement this Period

Purpose of Disbursement  
Event Supplies

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Prior Period Void 06/30/08

State: District:

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

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

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Park Avenue Cafe  Mailing Address 100 East 63rd Street  City New York State NY Zip Code 10021  Purpose of Disbursement Event Expense: Catering/Venue Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72990 Date of Disbursement <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>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-1446.85</td> </tr> </table> Prior Period Void 7/9/07	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	9	-1446.85
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	7		2	0	0	9														
-1446.85																							
B.	Full Name (Last, First, Middle Initial) Park Avenue Cafe  Mailing Address 100 East 63rd Street  City New York State NY Zip Code 10021  Purpose of Disbursement Event Expense: Catering/Venue Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73037 Date of Disbursement <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>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1446.85</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	9	1446.85
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	7		2	0	0	9														
1446.85																							
C.	Full Name (Last, First, Middle Initial) Party Center  Mailing Address 480 Pothouse Road  City Phoenixville State PA Zip Code 19460  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72945 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-1219.00</td> </tr> </table> Prior Period Void 6/30/08	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	4		2	0	0	9	-1219.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	4		2	0	0	9														
-1219.00																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td style="font-size: 1.2em;">-1219.00</td> </tr> </table>	-1219.00
-1219.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td style="height: 20px;"> </td> </tr> </table>	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Paychex  Mailing Address 7450 Tilghman Street Suite 107  City Allentown State PA Zip Code 18106  Purpose of Disbursement Payroll Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-73120 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 9	Amount of Each Disbursement this Period 196.05
<b>B.</b>	Full Name (Last, First, Middle Initial) Paychex  Mailing Address 7450 Tilghman Street Suite 107  City Allentown State PA Zip Code 18106  Purpose of Disbursement Payroll Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-73121 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 196.05
<b>C.</b>	Full Name (Last, First, Middle Initial) Paychex  Mailing Address 7450 Tilghman Street Suite 107  City Allentown State PA Zip Code 18106  Purpose of Disbursement Payroll Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-73151 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 193.03

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>585.13</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Paychex  Mailing Address 7450 Tilghman Street Suite 107  City Allentown State PA Zip Code 18106  Purpose of Disbursement Payroll Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73152 Date of Disbursement 08 / 31 / 2009  Amount of Each Disbursement this Period 193.03
B.	Full Name (Last, First, Middle Initial) Paychex  Mailing Address 7450 Tilghman Street Suite 107  City Allentown State PA Zip Code 18106  Purpose of Disbursement Payroll Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73539 Date of Disbursement 09 / 15 / 2009  Amount of Each Disbursement this Period 193.03
C.	Full Name (Last, First, Middle Initial) Paychex  Mailing Address 7450 Tilghman Street Suite 107  City Allentown State PA Zip Code 18106  Purpose of Disbursement Payroll Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73540 Date of Disbursement 09 / 30 / 2009  Amount of Each Disbursement this Period 207.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	593.59
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Mailing Address Post Office Box 758827

City Baltimore State MD Zip Code 21275-8827

Purpose of Disbursement  
Polling

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73613  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Mailing Address Post Office Box 758827

City Baltimore State MD Zip Code 21275-8827

Purpose of Disbursement  
Polling

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73614  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Mailing Address Post Office Box 758827

City Baltimore State MD Zip Code 21275-8827

Purpose of Disbursement  
Polling

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23-73615  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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



# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Transaction ID: SB23-73616  
Date of Disbursement

Mailing Address Post Office Box 758827

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	9

City Baltimore State MD Zip Code 21275-8827

Amount of Each Disbursement this Period

25000.00
----------

Purpose of Disbursement  
Polling

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Transaction ID: SB23-73617  
Date of Disbursement

Mailing Address Post Office Box 758827

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	9

City Baltimore State MD Zip Code 21275-8827

Amount of Each Disbursement this Period

20000.00
----------

Purpose of Disbursement  
Polling

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Transaction ID: SB23-73618  
Date of Disbursement

Mailing Address Post Office Box 758827

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	9

City Baltimore State MD Zip Code 21275-8827

Amount of Each Disbursement this Period

15000.00
----------

Purpose of Disbursement  
Polling

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

60000.00
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TOTAL This Period (last page this line number only) ..... ▶

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# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC Mailing Address Post Office Box 758827 City Baltimore State MD Zip Code 21275-8827 Purpose of Disbursement Polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73619 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 25000.00 Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC Mailing Address Post Office Box 758827 City Baltimore State MD Zip Code 21275-8827 Purpose of Disbursement Polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73620 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 5000.00 Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC Mailing Address Post Office Box 758827 City Baltimore State MD Zip Code 21275-8827 Purpose of Disbursement Mail Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73621 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 10000.00 Category/Type

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

**40000.00**

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC	Transaction ID: SB23-73622
	Mailing Address Post Office Box 758827	Date of Disbursement MM / DD / YYYY 09 / 30 / 2009
	City Baltimore State MD Zip Code 21275-8827	Amount of Each Disbursement this Period 40000.00
	Purpose of Disbursement Polling	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC	Transaction ID: SB23-73623
	Mailing Address Post Office Box 758827	Date of Disbursement MM / DD / YYYY 09 / 30 / 2009
	City Baltimore State MD Zip Code 21275-8827	Amount of Each Disbursement this Period 40000.00
	Purpose of Disbursement Polling	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC	Transaction ID: SB23-73624
	Mailing Address Post Office Box 758827	Date of Disbursement MM / DD / YYYY 09 / 30 / 2009
	City Baltimore State MD Zip Code 21275-8827	Amount of Each Disbursement this Period 15000.00
	Purpose of Disbursement Polling	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>95000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC	Transaction ID: SB23-73625
	Mailing Address Post Office Box 758827	Date of Disbursement 09 / 30 / 2009
	City Baltimore State MD Zip Code 21275-8827	Amount of Each Disbursement this Period 35000.00
	Purpose of Disbursement Polling	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC	Transaction ID: SB23-73626
	Mailing Address Post Office Box 758827	Date of Disbursement 09 / 30 / 2009
	City Baltimore State MD Zip Code 21275-8827	Amount of Each Disbursement this Period 35000.00
	Purpose of Disbursement Polling	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC	Transaction ID: SB23-73627
	Mailing Address Post Office Box 758827	Date of Disbursement 09 / 30 / 2009
	City Baltimore State MD Zip Code 21275-8827	Amount of Each Disbursement this Period 20000.00
	Purpose of Disbursement Polling	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	90000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Mailing Address Post Office Box 758827

City Baltimore State MD Zip Code 21275-8827

Purpose of Disbursement  
Polling

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73628  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Mailing Address Post Office Box 758827

City Baltimore State MD Zip Code 21275-8827

Purpose of Disbursement  
Polling

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73629  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Penn, Schoen & Berland Assoc. LLC

Mailing Address Post Office Box 758827

City Baltimore State MD Zip Code 21275-8827

Purpose of Disbursement  
Polling

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23-73630  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC Mailing Address Post Office Box 758827 City Baltimore State MD Zip Code 21275-8827 Purpose of Disbursement Mail Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73631 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 37000.00 Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC Mailing Address Post Office Box 758827 City Baltimore State MD Zip Code 21275-8827 Purpose of Disbursement Mail Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73632 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 4500.00 Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC Mailing Address Post Office Box 758827 City Baltimore State MD Zip Code 21275-8827 Purpose of Disbursement Mail Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73633 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 45000.00 Category/Type

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

**86500.00**

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Penn, Schoen & Berland Assoc. LLC  Mailing Address Post Office Box 758827  City Baltimore State MD Zip Code 21275-8827  Purpose of Disbursement Mail Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73634 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 5500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Pico De Gallo  Mailing Address 800 Dolorosa Suite 204  City San Antonio State TX Zip Code 78207  Purpose of Disbursement Food & Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-72995 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period -279.17  Prior Period Void 9/12/08
<b>C.</b>	Full Name (Last, First, Middle Initial) Pico De Gallo  Mailing Address 800 Dolorosa Suite 204  City San Antonio State TX Zip Code 78207  Purpose of Disbursement Food & Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73038 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period 279.17

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Pima County Recorder	Transaction ID: SB23-73047 Date of Disbursement 08 / 07 / 2009
	Mailing Address 115 North Church Avenue	Amount of Each Disbursement this Period -550.00
	City Tucson State AZ Zip Code 85701	
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Prior Period Void 01/24/08
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) PingTone Communications	Transaction ID: SB23-72924 Date of Disbursement 07 / 17 / 2009
	Mailing Address 13921 Park Center Road 1st Floor	Amount of Each Disbursement this Period 1109.03
	City Herndon State VA Zip Code 20171	
	Purpose of Disbursement Internet Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) PingTone Communications	Transaction ID: SB23-73018 Date of Disbursement 08 / 07 / 2009
	Mailing Address 13921 Park Center Road 1st Floor	Amount of Each Disbursement this Period 1120.14
	City Herndon State VA Zip Code 20171	
	Purpose of Disbursement Internet Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1679.17
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) PingTone Communications  Mailing Address 13921 Park Center Road 1st Floor  City Herndon State VA Zip Code 20171  Purpose of Disbursement Internet Service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73455 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period  950.42
<b>B.</b>	Full Name (Last, First, Middle Initial) Premier Corporate Services  Mailing Address 200 West Adams Street Suite 2007  City Chicago State IL Zip Code 60606  Purpose of Disbursement Registration Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73456 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period  1799.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Promo Marketing  Mailing Address Road Number 2 Marginal BA  City Flambojan, Manati State PR Zip Code 00674  Purpose of Disbursement Printing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-72946 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period  -211.86  Prior Period Void 6/30/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2537.56</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Pyramid Audio Productions, Inc

Transaction ID: SB23-72970  
Date of Disbursement

Mailing Address 300 Jefferson HWY Suite #305

/   /

City State Zip Code  
Jefferson LA 70121

Amount of Each Disbursement this Period

Purpose of Disbursement  
Event Expense: Equipment

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

Prior Period Void 4/28/08

State: District:

B.

Full Name (Last, First, Middle Initial)  
Ricoh Americas Corporation

Transaction ID: SB23-72925  
Date of Disbursement

Mailing Address Post Office Box 41602

/   /

City State Zip Code  
Philadelphia PA 19101-1602

Amount of Each Disbursement this Period

Purpose of Disbursement  
Equipment

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Ricoh's Americas Corporation

Transaction ID: SB23-72926  
Date of Disbursement

Mailing Address Post Office Box 4245

/   /

City State Zip Code  
Carol Stream IL 60197-4245

Amount of Each Disbursement this Period

Purpose of Disbursement  
Equipment

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Alexis Rising	Transaction ID: SB23-72962
	Mailing Address 2901 Half Olive Drive	Date of Disbursement 07 / 28 / 2009
	City Lumberton State NC Zip Code 28358	Amount of Each Disbursement this Period -200.00
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Prior Period Void 5/4/08

B.	Full Name (Last, First, Middle Initial) Ron's Porta Johns, Inc.	Transaction ID: SB23-72950
	Mailing Address 346 Indian Run Road	Date of Disbursement 07 / 24 / 2009
	City Marietta State OH Zip Code 45750	Amount of Each Disbursement this Period -318.00
	Purpose of Disbursement Event Expense: Equipment Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Prior Period Void 6/30/08

C.	Full Name (Last, First, Middle Initial) Schwartz-Cotton Realty	Transaction ID: SB23-73052
	Mailing Address 2740 East County Line Road	Date of Disbursement 08 / 07 / 2009
	City Ardmore State PA Zip Code 19003	Amount of Each Disbursement this Period -675.00
	Purpose of Disbursement Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Prior Period Void 4/14/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-1193.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Secretary of the State

Transaction ID: SB23-73019  
Date of Disbursement

Mailing Address Post Office Box 150470

/   /

City State Zip Code  
Hartford CT 06115-0470

Amount of Each Disbursement this Period

Purpose of Disbursement  
Taxes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Sheraton Philadelphia City Center Hotel

Transaction ID: SB23-73079  
Date of Disbursement

Mailing Address 17th & Race Streets

/   /

City State Zip Code  
Philadelphia PA 19103

Amount of Each Disbursement this Period

Purpose of Disbursement  
Event Expense: Equipment

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 05/13/08

C.

Full Name (Last, First, Middle Initial)  
Sheraton Philadelphia City Center Hotel

Transaction ID: SB23-73080  
Date of Disbursement

Mailing Address 17th & Race Streets

/   /

City State Zip Code  
Philadelphia PA 19103

Amount of Each Disbursement this Period

Purpose of Disbursement  
Internet Service

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 05/13/08

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Sheraton Philadelphia City Center Hotel <hr/> Mailing Address 17th & Race Streets <hr/> City Philadelphia State PA Zip Code 19103 <hr/> Purpose of Disbursement Food & Beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73081 Date of Disbursement 08 / 27 / 2009 <hr/> Amount of Each Disbursement this Period -180.00 <hr/> Prior Period Void 05/13/08
B.	Full Name (Last, First, Middle Initial) Sherwood Partners, LLC <hr/> Mailing Address Post Office Box 968 <hr/> City Owensboro State KY Zip Code 42302-0968 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73072 Date of Disbursement 08 / 27 / 2009 <hr/> Amount of Each Disbursement this Period -1240.00 <hr/> Prior Period Void 04/30/08
C.	Full Name (Last, First, Middle Initial) Sherwood Partners, LLC <hr/> Mailing Address Post Office Box 968 <hr/> City Owensboro State KY Zip Code 42302-0968 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73103 Date of Disbursement 08 / 28 / 2009 <hr/> Amount of Each Disbursement this Period 1240.00

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

-180.00

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 263

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<p><b>A.</b> Full Name (Last, First, Middle Initial) Soundpath Conferencing c/o American Teleconf. Svcs.</p> <p>Mailing Address Post Office Box 405808</p> <p>City Atlanta State GA Zip Code 30384-5808</p> <p>Purpose of Disbursement Telephone Service</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-73020</p> <p>Date of Disbursement MM / DD / YYYY 08 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 32.39</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) South Carolina Sec. of State</p> <p>Mailing Address Post Office Box 11350</p> <p>City Columbia State SC Zip Code 29211</p> <p>Purpose of Disbursement Registration Fees</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-73175</p> <p>Date of Disbursement MM / DD / YYYY 09 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) South Carolina State Universit Athletics Department</p> <p>Mailing Address 300 College Street, N.E.</p> <p>City Orangeburg State SC Zip Code 29117</p> <p>Purpose of Disbursement Event Expense: Catering/Venue</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-73006</p> <p>Date of Disbursement MM / DD / YYYY 08 / 07 / 2009</p> <p>Amount of Each Disbursement this Period -2000.00</p> <p>Category/Type</p> <p>Prior Period Void 10/10/07</p>

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

**-1957.61**

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) South Carolina State Universit Athletics Department	Transaction ID: SB23-73039 Date of Disbursement MM / DD / YYYY 08 / 07 / 2009
	Mailing Address 300 College Street, N.E. City Orangeburg State SC Zip Code 29117 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period 2000.00 Category/Type

B.	Full Name (Last, First, Middle Initial) State of New Hampshire Corporate Div., Dept. of State	Transaction ID: SB23-73172 Date of Disbursement MM / DD / YYYY 09 / 08 / 2009
	Mailing Address 107 North Main Street City Concord State NH Zip Code 03301-4989 Purpose of Disbursement Registration Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period 25.00 Category/Type

C.	Full Name (Last, First, Middle Initial) State of New Jersey	Transaction ID: SB23-73067 Date of Disbursement MM / DD / YYYY 08 / 24 / 2009
	Mailing Address Post Office Box 929 City Trenton State NJ Zip Code 08646-0929 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period 68.13 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2093.13
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen F. Austin State Univ.  Mailing Address Student Center Operations Box 6094  City Nacogdoches State TX Zip Code 75962  Purpose of Disbursement Event Expense: Catering/Venue Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73053 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period -870.33  Prior Period Void 4/28/08
<b>B.</b>	Full Name (Last, First, Middle Initial) Stuart C. Towe Farms  Mailing Address 7966 31st Avenue  City Norway State IA Zip Code 52318  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-72968 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period -240.00  Prior Period Void 8/22/07
<b>C.</b>	Full Name (Last, First, Middle Initial) Studio Instrument Rentals, Inc  Mailing Address 475 10th Avenue  City New York State NY Zip Code 10018  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-72947 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period -400.99  Prior Period Void 6/30/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-1511.32</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Summerville D.R.E.A.M.

Transaction ID: SB23-73003  
Date of Disbursement

Mailing Address Post Office Box 370

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	0	9

City State Zip Code  
Summerville SC 29484

Amount of Each Disbursement this Period

Purpose of Disbursement  
Registration Fees



Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Prior Period Void 11/29/07

State: District:

B.

Full Name (Last, First, Middle Initial)  
Summerville D.R.E.A.M.

Transaction ID: SB23-73040  
Date of Disbursement

Mailing Address Post Office Box 370

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	0	9

City State Zip Code  
Summerville SC 29484

Amount of Each Disbursement this Period

Purpose of Disbursement



Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Swank Audio Visuals

Transaction ID: SB23-73004  
Date of Disbursement

Mailing Address 807 Montgomery Street

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	0	9

City State Zip Code  
San Francisco CA 94133

Amount of Each Disbursement this Period

Purpose of Disbursement  
Event Expense: Equipment



Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Prior Period Void 4/2/07

State: District:

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Swank Audio Visuals  Mailing Address 807 Montgomery Street  City San Francisco State CA Zip Code 94133  Purpose of Disbursement Event Expense: Equipment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73041 Date of Disbursement 08 / 07 / 2009  Amount of Each Disbursement this Period 1713.25
B.	Full Name (Last, First, Middle Initial) Synetech, LLC  Mailing Address 310 Broadview Avenue Suite 201  City Warrenton State VA Zip Code 20186  Purpose of Disbursement Contribution Processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73021 Date of Disbursement 08 / 07 / 2009  Amount of Each Disbursement this Period 750.00
C.	Full Name (Last, First, Middle Initial) Synetech, LLC  Mailing Address 310 Broadview Avenue Suite 201  City Warrenton State VA Zip Code 20186  Purpose of Disbursement Contribution Processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73457 Date of Disbursement 09 / 30 / 2009  Amount of Each Disbursement this Period 750.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3213.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Big Event, Inc.</p> <p>Mailing Address 2837 New Boston Road</p> <p>City State Zip Code Texarkana TX 75501</p> <p>Purpose of Disbursement Event Expense: Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB23-73050 <b>Date of Disbursement</b> 08 / 07 / 2009</p> <p>Amount of Each Disbursement this Period -2649.42</p> <p>Prior Period Void 3/31/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Three Rivers Entertainment &amp; Production</p> <p>Mailing Address 1028 Saw Mill Run Blvd</p> <p>City State Zip Code Pittsburgh PA 15220</p> <p>Purpose of Disbursement Event Expense: Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB23-72971 <b>Date of Disbursement</b> 07 / 28 / 2009</p> <p>Amount of Each Disbursement this Period -810.00</p> <p>Prior Period Void 6/30/08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Topaz Hotel</p> <p>Mailing Address 1733 N Street, N.W.</p> <p>City State Zip Code Washington DC 20036</p> <p>Purpose of Disbursement Event Expense: Catering/Venue</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB23-73082 <b>Date of Disbursement</b> 08 / 27 / 2009</p> <p>Amount of Each Disbursement this Period -50.00</p> <p>Prior Period Void 04/24/07</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>-3509.42</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Travinia	Transaction ID: SB23-73073 Date of Disbursement 08 / 27 / 2009
	Mailing Address 1625 Woodruff Road	Amount of Each Disbursement this Period -252.00
	City Greenville State SC Zip Code 29607	
	Purpose of Disbursement Event Expense: Catering/Venue	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Prior Period Void 07/23/07
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Travinia	Transaction ID: SB23-73102 Date of Disbursement 08 / 28 / 2009
	Mailing Address 1625 Woodruff Road	Amount of Each Disbursement this Period 252.00
	City Greenville State SC Zip Code 29607	
	Purpose of Disbursement Event Expense: Catering/Venue	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Triplex	Transaction ID: SB23-72927 Date of Disbursement 07 / 17 / 2009
	Mailing Address Post Office Box 3603	Amount of Each Disbursement this Period 363.19
	City Omaha State NE Zip Code 68103-0603	
	Purpose of Disbursement List Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	363.19
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Triplex Mailing Address Post Office Box 3603 City Omaha State NE Zip Code 68103-0603 Purpose of Disbursement List Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73458 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 227.31 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Tuck-It-Away Associates, LP Mailing Address 3261 Broadway City New York State NY Zip Code 10027 Purpose of Disbursement Storage Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73074 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> -516.00 Category/ Type Prior Period Void 04/27/07
<b>C.</b>	Full Name (Last, First, Middle Initial) Tuck-It-Away Associates, LP Mailing Address 3261 Broadway City New York State NY Zip Code 10027 Purpose of Disbursement Storage Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73101 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 516.00 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	227.31
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Unipark Valet & Parking Svcs. Inc.	Transaction ID: SB23-73075 Date of Disbursement 08 / 27 / 2009
	Mailing Address 10020 Colesville Road Number B	Amount of Each Disbursement this Period -1010.00
	City Silver Spring State MD Zip Code 20901	
	Purpose of Disbursement Parking Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 10/18/07

B.	Full Name (Last, First, Middle Initial) Unipark Valet & Parking Svcs. Inc.	Transaction ID: SB23-73100 Date of Disbursement 08 / 28 / 2009
	Mailing Address 10020 Colesville Road Number B	Amount of Each Disbursement this Period 1010.00
	City Silver Spring State MD Zip Code 20901	
	Purpose of Disbursement Parking Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) United Business Technologies	Transaction ID: SB23-73022 Date of Disbursement 08 / 07 / 2009
	Mailing Address 9218 Gaither Road	Amount of Each Disbursement this Period 285.95
	City Gaithersburg State MD Zip Code 20877	
	Purpose of Disbursement Equipment Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	285.95
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) United Business Technologies <hr/> Mailing Address 9218 Gaither Road <hr/> City Gaithersburg State MD Zip Code 20877 <hr/> Purpose of Disbursement Equipment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73068 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 285.95
B.	Full Name (Last, First, Middle Initial) United Business Technologies <hr/> Mailing Address 9218 Gaither Road <hr/> City Gaithersburg State MD Zip Code 20877 <hr/> Purpose of Disbursement Equipment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73459 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 285.95
C.	Full Name (Last, First, Middle Initial) University of North TX Union Union Business Office <hr/> Mailing Address Post Office Box 310710 <hr/> City Denton State TX Zip Code 76203-0710 <hr/> Purpose of Disbursement Event Expense: Equipment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72948 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -30.00 <hr/> Prior Period Void 6/30/08

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

541.90

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

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Utrecht & Phillips, PLLC <hr/> Mailing Address 1900 M Street NW Suite 500 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Consulting/Legal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73023 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9	Amount of Each Disbursement this Period 30423.58
<b>B.</b>	Full Name (Last, First, Middle Initial) Utrecht & Phillips, PLLC <hr/> Mailing Address 1900 M Street NW Suite 500 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Consulting/Legal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73069 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period 30283.84
<b>C.</b>	Full Name (Last, First, Middle Initial) Utrecht & Phillips, PLLC <hr/> Mailing Address 1900 M Street NW Suite 500 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Consulting/Legal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73460 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 30314.59

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	91022.01
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) U.S. Postmaster  Mailing Address 1050 Connecticut Avenue, N.W.  City Washington State DC Zip Code 20036-5303 Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72957 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period -2960.00  Prior Period Void 12/22/08
B.	Full Name (Last, First, Middle Initial) Valley Wide Flag Co.  Mailing Address 7401 North Taylor  City Mission State TX Zip Code 78572 Purpose of Disbursement Event Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73005 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period -70.36  Prior Period Void 3/31/08
C.	Full Name (Last, First, Middle Initial) Valley Wide Flag Co.  Mailing Address 7401 North Taylor  City Mission State TX Zip Code 78572 Purpose of Disbursement Event Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73042 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period 70.36

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-2960.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Eric Velasquez  Mailing Address 12800 Center Lake Dr. #528  City Austin State TX Zip Code 78753  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-72966 Date of Disbursement 07 / 24 / 2009  Amount of Each Disbursement this Period -225.00  Prior Period Void 3/2/08
B.	Full Name (Last, First, Middle Initial) Verizon  Mailing Address Post Office Box 11328  City St. Petersburg State FL Zip Code 33733  Purpose of Disbursement Telephone Service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73084 Date of Disbursement 08 / 27 / 2009  Amount of Each Disbursement this Period -5000.00  Prior Period Void 04/15/08
C.	Full Name (Last, First, Middle Initial) Verizon North  Mailing Address Post Office Box 9688  City Mission Hills State CA Zip Code 91346-9688  Purpose of Disbursement Telephone Service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73025 Date of Disbursement 08 / 07 / 2009  Amount of Each Disbursement this Period 160.23

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-5064.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Verizon South	Transaction ID: SB23-73024 Date of Disbursement 08 / 07 / 2009
	Mailing Address Post Office Box 920041	Amount of Each Disbursement this Period 401.24
	City Dallas State TX Zip Code 75392	
	Purpose of Disbursement Telephone Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB23-72928 Date of Disbursement 07 / 17 / 2009
	Mailing Address Post Office Box 25505	Amount of Each Disbursement this Period 306.69
	City Lehigh Valley State PA Zip Code 18002-5505	
	Purpose of Disbursement Telephone Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB23-73026 Date of Disbursement 08 / 07 / 2009
	Mailing Address Post Office Box 15062	Amount of Each Disbursement this Period 103.10
	City Albany State NY Zip Code 12212-5062	
	Purpose of Disbursement Telephone Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>811.03</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB23-73027 Date of Disbursement 08 / 07 / 2009
	Mailing Address Post Office Box 25505	Amount of Each Disbursement this Period 381.46
	City Lehigh Valley State PA Zip Code 18002-5505	
	Purpose of Disbursement Telephone Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Vermont Secretary of State	Transaction ID: SB23-73176 Date of Disbursement 09 / 08 / 2009
	Mailing Address 26 Terrace Street	Amount of Each Disbursement this Period 20.00
	City Montpelier State VT Zip Code 05609-1104	
	Purpose of Disbursement Registration Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Vienna Tax Service, Inc.	Transaction ID: SB23-73077 Date of Disbursement 08 / 27 / 2009
	Mailing Address Post Office Box 1308	Amount of Each Disbursement this Period -800.00
	City Vienna State IL Zip Code 62995	
	Purpose of Disbursement Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Prior Period Void 04/30/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-398.54</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: SB23-73140 Date of Disbursement
	Mailing Address Post Office Box 1777	<input type="text" value="07"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Richmond State VA Zip Code 23218-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="78.54"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: SB23-72929 Date of Disbursement
	Mailing Address Post Office Box 1777	<input type="text" value="07"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Richmond State VA Zip Code 23218-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="20.22"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: SB23-73146 Date of Disbursement
	Mailing Address Post Office Box 1777	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Richmond State VA Zip Code 23218-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="78.54"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="177.30"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: SB23-73158 Date of Disbursement
	Mailing Address Post Office Box 1777	<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Richmond State VA Zip Code 23218-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="78.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: SB23-73163 Date of Disbursement
	Mailing Address Post Office Box 1777	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Richmond State VA Zip Code 23218-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="78.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: SB23-73165 Date of Disbursement
	Mailing Address Post Office Box 1777	<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Richmond State VA Zip Code 23218-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="40.59"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="197.67"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: SB23-73552 Date of Disbursement
	Mailing Address Post Office Box 1777	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Richmond State VA Zip Code 23218-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="78.54"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Virginia Dept of Taxation	Transaction ID: SB23-73547 Date of Disbursement
	Mailing Address Post Office Box 1777	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Richmond State VA Zip Code 23218-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="78.54"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Allison Wright	Transaction ID: SB23-73110 Date of Disbursement
	Mailing Address 3604 Legation St NW	<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20015	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary	<input type="text" value="2838.77"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2995.85"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Allison Wright Mailing Address 3604 Legation St NW City Washington State DC Zip Code 20015 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73115 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 2769.29 Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Allison Wright Mailing Address 3604 Legation St NW City Washington State DC Zip Code 20015 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73119 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 2838.77 Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Allison Wright Mailing Address 3604 Legation St NW City Washington State DC Zip Code 20015 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-73126 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <b>Amount of Each Disbursement this Period</b> 2769.29 Category/Type

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

**8377.35**

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



**Schedule B-P  
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Allison Wright	Transaction ID: SB23-73554 Date of Disbursement 09 / 15 / 2009
	Mailing Address 3604 Legation St NW	Amount of Each Disbursement this Period 2838.77
	City Washington State DC Zip Code 20015	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Allison Wright	Transaction ID: SB23-73558 Date of Disbursement 09 / 30 / 2009
	Mailing Address 3604 Legation St NW	Amount of Each Disbursement this Period 2769.29
	City Washington State DC Zip Code 20015	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Yolo County	Transaction ID: SB23-73083 Date of Disbursement 08 / 27 / 2009
	Mailing Address 625 Court Street Room B05	Amount of Each Disbursement this Period -130.00
	City Woodland State CA Zip Code 95695	
	Purpose of Disbursement List Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Prior Period Void 01/10/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5478.06
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Casey Young Mailing Address 293 Moore's Lane City Lumberton State NC Zip Code 28358 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72963 Date of Disbursement 07 / 28 / 2009 Amount of Each Disbursement this Period -200.00 Prior Period Void 5/4/08
B.	Full Name (Last, First, Middle Initial) Zeo Brothers Productions, Inc. Mailing Address 244 East County Line Road City Hatboro State PA Zip Code 19040 Purpose of Disbursement Event Expense: Equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-72949 Date of Disbursement 07 / 24 / 2009 Amount of Each Disbursement this Period -500.00 Prior Period Void 6/30/08
C.	Full Name (Last, First, Middle Initial) 201 North George, LLC Mailing Address 201 North George Street Suite 101 City Charles Town State WV Zip Code 25414 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73009 Date of Disbursement 08 / 07 / 2009 Amount of Each Disbursement this Period 500.00

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

-200.00

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

0.00

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) 201 North George, LLC  Mailing Address 201 North George Street Suite 101  City Charles Town State WV Zip Code 25414  Purpose of Disbursement Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73054 Date of Disbursement 08 / 07 / 2009  Amount of Each Disbursement this Period -2000.00  Prior Period Void 4/29/08
B.	Full Name (Last, First, Middle Initial) 42 Main Street, LLC P.R.E.P. Contractors, LLC  Mailing Address 208 Daniel Webster Highway  City Plymouth State NH Zip Code 03264  Purpose of Disbursement Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-72998 Date of Disbursement 08 / 07 / 2009  Amount of Each Disbursement this Period -850.00  Prior Period Void 8/28/07
C.	Full Name (Last, First, Middle Initial) 42 Main Street, LLC P.R.E.P. Contractors, LLC  Mailing Address 208 Daniel Webster Highway  City Plymouth State NH Zip Code 03264  Purpose of Disbursement Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-73043 Date of Disbursement 08 / 07 / 2009  Amount of Each Disbursement this Period 850.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) 800 N Mesa LP Mailing Address 1301 North Oregon Street Suite 200 City El Paso State TX Zip Code 79902 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73070 Date of Disbursement 08 / 27 / 2009 Amount of Each Disbursement this Period -2071.23 Prior Period Void 02/16/08
B.	Full Name (Last, First, Middle Initial) 800 N Mesa LP Mailing Address 1301 North Oregon Street Suite 200 City El Paso State TX Zip Code 79902 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-73105 Date of Disbursement 08 / 28 / 2009 Amount of Each Disbursement this Period 2071.23
C.	Full Name (Last, First, Middle Initial) Unitemized Line 23 Expenditures Mailing Address City State Zip Code Purpose of Disbursement Candidate Name 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) ▼	Transaction ID: SB23UNITEMIZED-1 Date of Disbursement 09 / 30 / 2009 Amount of Each Disbursement this Period 0.00

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

0.00

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

773824.44

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Tracie Ahern	Transaction ID: SB28A-73181 Date of Disbursement 09 / 18 / 2009
	Mailing Address 240 E 10th St Apt 3C	Amount of Each Disbursement this Period -2300.00
	City New York State NY Zip Code 10003-7799	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Tracie Ahern	Transaction ID: SB28A-73197 Date of Disbursement 09 / 21 / 2009
	Mailing Address 240 E 10th St Apt 3C	Amount of Each Disbursement this Period 2300.00
	City New York State NY Zip Code 10003-7799	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) John Alchin	Transaction ID: SB28A-73224 Date of Disbursement 09 / 22 / 2009
	Mailing Address 241 South 6th Street Apartment 2311	Amount of Each Disbursement this Period -2300.00
	City Philadelphia State PA Zip Code 19106-3736	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) John Alchin  Mailing Address 241 South 6th Street Apartment 2311  City Philadelphia State PA Zip Code 19106-3736  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73262 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2009  Amount of Each Disbursement this Period 2300.00
B.	Full Name (Last, First, Middle Initial) Kristine Amerine  Mailing Address 4156 Woodgreen  City Las Vegas State NV Zip Code 89108  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73384 Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2009  Amount of Each Disbursement this Period 15.00
C.	Full Name (Last, First, Middle Initial) Lynn Barber  Mailing Address 404 E 76th St Apt 4C  City New York State NY Zip Code 10021-1410  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73180 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2009  Amount of Each Disbursement this Period -100.00  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2215.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Lynn Barber

Mailing Address 404 E 76th St Apt 4C

City State Zip Code  
New York NY 10021-1410

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73198  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
Norma Barfield

Mailing Address 9473 Turnberry Drive

City State Zip Code  
Potomac MD 20854

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73399  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Norma Barfield

Mailing Address 9473 Turnberry Drive

City State Zip Code  
Potomac MD 20854

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73423  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)

Patricia Barille

Transaction ID: SB28A-73385

Date of Disbursement

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

Mailing Address 7146 Michigan Isle Road

City State Zip Code  
Lake Worth FL 33467

Amount of Each Disbursement this Period

30.00
-------

Purpose of Disbursement  
Refund

Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Kelly Behun

Transaction ID: SB28A-73225

Date of Disbursement

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

Mailing Address 1 Central Park West  
Penthouse

City State Zip Code  
New York NY 10023-7703

Amount of Each Disbursement this Period

-2300.00
----------

Purpose of Disbursement  
Refund

Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)

Kelly Behun

Transaction ID: SB28A-73263

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	0	9

Mailing Address 1 Central Park West  
Penthouse

City State Zip Code  
New York NY 10023-7703

Amount of Each Disbursement this Period

2300.00
---------

Purpose of Disbursement  
Refund

Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

30.00
-------

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

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# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Jacqueline Bellanti  Mailing Address 6007 Corewood Ln  City Bethesda State MD Zip Code 20816-2301  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73182 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2009  Amount of Each Disbursement this Period -7.74  Prior Period Void 8/28/08
<b>B.</b>	Full Name (Last, First, Middle Initial) Jacqueline Bellanti  Mailing Address 6007 Corewood Ln  City Bethesda State MD Zip Code 20816-2301  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73199 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2009  Amount of Each Disbursement this Period 7.74
<b>C.</b>	Full Name (Last, First, Middle Initial) Mike Binder  Mailing Address 1272 Corsica Drive  City Pacific Palisades State CA Zip Code 90272  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73183 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08

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

-2300.00

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

-

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Mike Binder  Mailing Address 1272 Corsica Drive  City Pacific Palisades State CA Zip Code 90272  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73200 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9  Amount of Each Disbursement this Period 2300.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Deanna Blankenship  Mailing Address 1531 NE 172nd Street  City Shoreline State WA Zip Code 98155-6028  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73397 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period 10.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Ann W. Brown  Mailing Address 3005 Audubon Terrace, NW  City Washington State DC Zip Code 20008-2313  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73184 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 9  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Ann W. Brown  Mailing Address 3005 Audubon Terrace, NW  City Washington State DC Zip Code 20008-2313  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-73201 <b>Date of Disbursement</b> 09 / 21 / 2009  Amount of Each Disbursement this Period 2300.00  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Dorothy A. Budd  Mailing Address 3102 Oak Lawn Avenue Suite 1100  City Dallas State TX Zip Code 75219  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-73323 <b>Date of Disbursement</b> 09 / 25 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
<b>C.</b>	Full Name (Last, First, Middle Initial) Dorothy A. Budd  Mailing Address 3102 Oak Lawn Avenue Suite 1100  City Dallas State TX Zip Code 75219  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-73341 <b>Date of Disbursement</b> 09 / 25 / 2009  Amount of Each Disbursement this Period 2300.00  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Russell W. Budd <hr/> Mailing Address 3102 Oak Lawn Avenue Suite 1100 <hr/> City Dallas State TX Zip Code 75219 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73324 Date of Disbursement 09 / 25 / 2009 <hr/> Amount of Each Disbursement this Period -2300.00 <hr/> Prior Period Void 8/28/08
<b>B.</b>	Full Name (Last, First, Middle Initial) Russell W. Budd <hr/> Mailing Address 3102 Oak Lawn Avenue Suite 1100 <hr/> City Dallas State TX Zip Code 75219 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73342 Date of Disbursement 09 / 25 / 2009 <hr/> Amount of Each Disbursement this Period 2300.00 <hr/> Prior Period Void 8/28/08
<b>C.</b>	Full Name (Last, First, Middle Initial) Jan Burman <hr/> Mailing Address 67 Clinton Road <hr/> City Garden City State NY Zip Code 11530 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73400 Date of Disbursement 09 / 29 / 2009 <hr/> Amount of Each Disbursement this Period -200.00 <hr/> Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Jan Burman <hr/> Mailing Address 67 Clinton Road <hr/> City Garden City State NY Zip Code 11530 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73422 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2300.00
B.	Full Name (Last, First, Middle Initial) Jan Burman <hr/> Mailing Address 67 Clinton Road <hr/> City Garden City State NY Zip Code 11530 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73424 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 200.00
C.	Full Name (Last, First, Middle Initial) Elizabeth L. Byrnes <hr/> Mailing Address 4901 Yerba Santa Drive <hr/> City San Diego State CA Zip Code 92115-1039 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73240 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -500.00  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Elizabeth L. Byrnes

Mailing Address 4901 Yerba Santa Drive

City San Diego State CA Zip Code 92115-1039

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73276  
Date of Disbursement

09 / 24 / 2009

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)  
Sal Catucci

Mailing Address 738 Kitchawan Road

City Ossining State NY Zip Code 10562

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73185  
Date of Disbursement

09 / 18 / 2009

Amount of Each Disbursement this Period

-2300.00

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Sal Catucci

Mailing Address 738 Kitchawan Road

City Ossining State NY Zip Code 10562

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73202  
Date of Disbursement

09 / 21 / 2009

Amount of Each Disbursement this Period

2300.00

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

500.00

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Hung Lan Chung  Mailing Address 42-49 203rd Street Apartment 1L  City Bayside State NY Zip Code 11361-2557  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73226 Date of Disbursement 09 / 22 / 2009  Amount of Each Disbursement this Period -200.00  Prior Period Void 8/28/08
<b>B.</b>	Full Name (Last, First, Middle Initial) Hung Lan Chung  Mailing Address 42-49 203rd Street Apartment 1L  City Bayside State NY Zip Code 11361-2557  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73264 Date of Disbursement 09 / 23 / 2009  Amount of Each Disbursement this Period 200.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Mark Dehnert  Mailing Address 25 Bond Street Apartment 6W  City New York State NY Zip Code 10012  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73227 Date of Disbursement 09 / 22 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Mark Dehnert <hr/> Mailing Address 25 Bond Street Apartment 6W <hr/> City New York State NY Zip Code 10012 <hr/> Purpose of Disbursement Refund Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73265 Date of Disbursement <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>9</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2300.00</td> </tr> </table> Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	3	/	2	0	0	9	2300.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	2	3	/	2	0	0	9														
2300.00																							
B.	Full Name (Last, First, Middle Initial) Vithalbhai D. Dhaduk <hr/> Mailing Address 111 Windmere Circle <hr/> City Dalton State PA Zip Code 18414 <hr/> Purpose of Disbursement Refund Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73325 Date of Disbursement <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>9</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>-400.00</td> </tr> </table> Category/ Type  Prior Period Void 8/28/08	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	5	/	2	0	0	9	-400.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	2	5	/	2	0	0	9														
-400.00																							
C.	Full Name (Last, First, Middle Initial) Vithalbhai D. Dhaduk <hr/> Mailing Address 111 Windmere Circle <hr/> City Dalton State PA Zip Code 18414 <hr/> Purpose of Disbursement Refund Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73343 Date of Disbursement <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>9</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>400.00</td> </tr> </table> Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	5	/	2	0	0	9	400.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	2	5	/	2	0	0	9														
400.00																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00
2300.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td> </td> </tr> </table>	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Suzanne Dranow	Transaction ID: SB28A-72910 Date of Disbursement 07 / 20 / 2009
	Mailing Address 776 Sunfield Court	Amount of Each Disbursement this Period -2300.00
	City Westlake Village State CA Zip Code 91362	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Suzanne Dranow	Transaction ID: SB28A-72933 Date of Disbursement 07 / 22 / 2009
	Mailing Address 776 Sunfield Court	Amount of Each Disbursement this Period 2300.00
	City Westlake Village State CA Zip Code 91362	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Janice Dunn	Transaction ID: SB28A-73228 Date of Disbursement 09 / 22 / 2009
	Mailing Address 545 Dos Cerros Corte	Amount of Each Disbursement this Period -35.00
	City Arroyo Grande State CA Zip Code 93420-1962	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-35.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Janice Dunn  Mailing Address 545 Dos Cerros Corte  City Arroyo Grande State CA Zip Code 93420-1962  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73266 Date of Disbursement 09 / 23 / 2009  Amount of Each Disbursement this Period 35.00  Category/Type
B.	Full Name (Last, First, Middle Initial) Arthur C. Edelstein  Mailing Address 4 Patchin Place  City New York State NY Zip Code 10011-8342  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73241 Date of Disbursement 09 / 23 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08  Category/Type
C.	Full Name (Last, First, Middle Initial) Arthur C. Edelstein  Mailing Address 4 Patchin Place  City New York State NY Zip Code 10011-8342  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73277 Date of Disbursement 09 / 24 / 2009  Amount of Each Disbursement this Period 2300.00  Category/Type

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

35.00

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Wendy C. Eisenhofer <hr/> Mailing Address 3509 Runnymede Drive <hr/> City Newtown Square State PA Zip Code 19073-3050 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73229 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -2300.00 <hr/> Prior Period Void 8/28/08
B.	Full Name (Last, First, Middle Initial) Wendy C. Eisenhofer <hr/> Mailing Address 3509 Runnymede Drive <hr/> City Newtown Square State PA Zip Code 19073-3050 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73267 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Farnaz Fardad-Finn <hr/> Mailing Address 24422 Little Valley Road <hr/> City Hidden Hill State CA Zip Code 91302 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73230 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -2300.00 <hr/> Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Farnaz Fardad-Finn	Transaction ID: SB28A-73268 Date of Disbursement 09 / 23 / 2009
	Mailing Address 24422 Little Valley Road	Amount of Each Disbursement this Period 2300.00
	City Hidden Hill State CA Zip Code 91302	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Jeffery D. Fesperman	Transaction ID: SB28A-73401 Date of Disbursement 09 / 29 / 2009
	Mailing Address 27750 Old Highway 112	Amount of Each Disbursement this Period -2300.00
	City Cameron State OK Zip Code 74932-2560	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	Prior Period Void 8/28/08

C.	Full Name (Last, First, Middle Initial) Jeffery D. Fesperman	Transaction ID: SB28A-73425 Date of Disbursement 09 / 30 / 2009
	Mailing Address 27750 Old Highway 112	Amount of Each Disbursement this Period 2300.00
	City Cameron State OK Zip Code 74932-2560	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	2300.00
TOTAL This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Kimberly Fullerton	Transaction ID: SB28A-73186 Date of Disbursement 09 / 18 / 2009
	Mailing Address 3639 Washington Street	Amount of Each Disbursement this Period -200.00
	City San Francisco State CA Zip Code 94118-1832	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Kimberly Fullerton	Transaction ID: SB28A-73203 Date of Disbursement 09 / 21 / 2009
	Mailing Address 3639 Washington Street	Amount of Each Disbursement this Period 200.00
	City San Francisco State CA Zip Code 94118-1832	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Maria Gatzaros	Transaction ID: SB28A-73231 Date of Disbursement 09 / 22 / 2009
	Mailing Address 16638 East Jefferson Ave.	Amount of Each Disbursement this Period -2300.00
	City Grosse Pointe Park State MI Zip Code 48230-1457	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-2300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Maria Gatzaros	Transaction ID: SB28A-73269 Date of Disbursement 09 / 23 / 2009
	Mailing Address 16638 East Jefferson Ave.	Amount of Each Disbursement this Period 2300.00
	City Grosse Pointe Park State MI Zip Code 48230-1457	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Ted Gatzaros	Transaction ID: SB28A-73232 Date of Disbursement 09 / 22 / 2009
	Mailing Address 16638 East Jefferson Ave.	Amount of Each Disbursement this Period -2300.00
	City Grosse Pointe Park State MI Zip Code 48230-1457	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	Prior Period Void 8/28/08

C.	Full Name (Last, First, Middle Initial) Ted Gatzaros	Transaction ID: SB28A-73270 Date of Disbursement 09 / 23 / 2009
	Mailing Address 16638 East Jefferson Ave.	Amount of Each Disbursement this Period 2300.00
	City Grosse Pointe Park State MI Zip Code 48230-1457	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Rose Gerszberg	Transaction ID: SB28A-73402 Date of Disbursement 09 / 29 / 2009
	Mailing Address 19 East 88th Street Apartment 2E	Amount of Each Disbursement this Period -2300.00
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Rose Gerszberg	Transaction ID: SB28A-73426 Date of Disbursement 09 / 30 / 2009
	Mailing Address 19 East 88th Street Apartment 2E	Amount of Each Disbursement this Period 2300.00
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Richard S. Glasser	Transaction ID: SB28A-73326 Date of Disbursement 09 / 25 / 2009
	Mailing Address 1304 Mockingbird Place	Amount of Each Disbursement this Period -2300.00
	City Virginia Beach State VA Zip Code 23451-4924	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Richard S. Glasser

Transaction ID: SB28A-73344  
Date of Disbursement

Mailing Address 1304 Mockingbird Place

/   /

City Virginia Beach State VA Zip Code 23451-4924

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Barbara Goldner

Transaction ID: SB28A-73403  
Date of Disbursement

Mailing Address 387 Washington Road

/   /

City Barrington State RI Zip Code 02806-2804

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Barbara Goldner

Transaction ID: SB28A-73428  
Date of Disbursement

Mailing Address 387 Washington Road

/   /

City Barrington State RI Zip Code 02806-2804

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

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



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) James C. Goodfellow, Jr.	Transaction ID: SB28A-73237 Date of Disbursement 09 / 22 / 2009
	Mailing Address 15 New Street Unit 203	Amount of Each Disbursement this Period -200.00
	City Hartford State CT Zip Code 06105	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) James C. Goodfellow, Jr.	Transaction ID: SB28A-73271 Date of Disbursement 09 / 23 / 2009
	Mailing Address 15 New Street Unit 203	Amount of Each Disbursement this Period 200.00
	City Hartford State CT Zip Code 06105	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) C. Leonard Gordon	Transaction ID: SB28A-73412 Date of Disbursement 09 / 29 / 2009
	Mailing Address 1400 Fifth Avenue	Amount of Each Disbursement this Period -700.00
	City New York State NY Zip Code 10026	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
C. Leonard Gordon

Transaction ID: SB28A-73427  
Date of Disbursement

Mailing Address 1400 Fifth Avenue

/   /

City State Zip Code  
New York NY 10026

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Chris Groobey

Transaction ID: SB28A-73335  
Date of Disbursement

Mailing Address 38 Troll Haven Lane

/   /

City State Zip Code  
Annapolis MD 21401-1133

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Chris Groobey

Transaction ID: SB28A-73345  
Date of Disbursement

Mailing Address 38 Troll Haven Lane

/   /

City State Zip Code  
Annapolis MD 21401-1133

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Thomas M. Gunn

Mailing Address 228 Gay Avenue

City Clayton State MO Zip Code 63105-3622

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73239  
Date of Disbursement

09 / 22 / 2009

Amount of Each Disbursement this Period

-2300.00

Prior Period Void 8/28/08

B.

Full Name (Last, First, Middle Initial)  
Thomas M. Gunn

Mailing Address 228 Gay Avenue

City Clayton State MO Zip Code 63105-3622

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73272  
Date of Disbursement

09 / 23 / 2009

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Stephen Hamrick

Mailing Address 139 Van Bolen Way

City Mahwah State NJ Zip Code 07430-3181

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73187  
Date of Disbursement

09 / 18 / 2009

Amount of Each Disbursement this Period

-2300.00

Prior Period Void 8/28/08

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

-2300.00

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial)  
Stephen Hamrick

Mailing Address 139 Van Bolen Way

City Mahwah State NJ Zip Code 07430-3181

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB28A-73204  
**Date of Disbursement:** 09 / 21 / 2009

Amount of Each Disbursement this Period: 2300.00

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
Thomas W. Hart

Mailing Address 30 Toledo Drive

City Lafayette State CA Zip Code 94549-2951

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB28A-73233  
**Date of Disbursement:** 09 / 22 / 2009

Amount of Each Disbursement this Period: -2300.00

Prior Period Void 8/28/08

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
Thomas W. Hart

Mailing Address 30 Toledo Drive

City Lafayette State CA Zip Code 94549-2951

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB28A-73273  
**Date of Disbursement:** 09 / 23 / 2009

Amount of Each Disbursement this Period: 2300.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 2300.00

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Norma W. Hess  Mailing Address 625 Park Avenue Apartment 9A  City New York State NY Zip Code 10065-6545  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73188 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 9  Amount of Each Disbursement this Period -780.00  Prior Period Void 8/28/08
<b>B.</b>	Full Name (Last, First, Middle Initial) Norma W. Hess  Mailing Address 625 Park Avenue Apartment 9A  City New York State NY Zip Code 10065-6545  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73205 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9  Amount of Each Disbursement this Period 780.00
<b>C.</b>	Full Name (Last, First, Middle Initial) David B. Hill  Mailing Address 575 Amalfi Drive  City Pacific Palisades State CA Zip Code 90272-4504  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73413 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08

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

-2300.00

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

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# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
David B. Hill

Transaction ID: SB28A-73429  
Date of Disbursement

Mailing Address 575 Amalfi Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	9

City Pacific Palisades State CA Zip Code 90272-4504

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/ Type
-------------------

2300.00
---------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Joan Hill

Transaction ID: SB28A-73404  
Date of Disbursement

Mailing Address 575 Amalfi Drive

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

City Pacific Palisades State CA Zip Code 90272-4504

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/ Type
-------------------

-2300.00
----------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Joan Hill

Transaction ID: SB28A-73430  
Date of Disbursement

Mailing Address 575 Amalfi Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	9

City Pacific Palisades State CA Zip Code 90272-4504

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/ Type
-------------------

2300.00
---------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

2300.00
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TOTAL This Period (last page this line number only) .....

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# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Ann W. Jackson  Mailing Address 98 Park Avenue  City Bronxville State NY Zip Code 10708-1705  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73234 Date of Disbursement 09 / 22 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
B.	Full Name (Last, First, Middle Initial) Ann W. Jackson  Mailing Address 98 Park Avenue  City Bronxville State NY Zip Code 10708-1705  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73274 Date of Disbursement 09 / 23 / 2009  Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Doris Johnson  Mailing Address 102 Pine Grove Lane  City Georgetown State SC Zip Code 29440-6830  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73327 Date of Disbursement 09 / 25 / 2009  Amount of Each Disbursement this Period -300.00  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Doris Johnson Mailing Address 102 Pine Grove Lane City Georgetown State SC Zip Code 29440-6830 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73346 Date of Disbursement 09 / 25 / 2009 Amount of Each Disbursement this Period 300.00 Category/Type
B.	Full Name (Last, First, Middle Initial) William B. Johnson Mailing Address Post Office Box 308 City Estero State FL Zip Code 33929 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73235 Date of Disbursement 09 / 22 / 2009 Amount of Each Disbursement this Period -500.00 Category/Type Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) William B. Johnson Mailing Address Post Office Box 308 City Estero State FL Zip Code 33929 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73275 Date of Disbursement 09 / 23 / 2009 Amount of Each Disbursement this Period 500.00 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Richard Kleinknecht  Mailing Address 28 Plover Lane  City Huntington State NY Zip Code 11743-1038  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73189 Date of Disbursement 09 / 18 / 2009  Amount of Each Disbursement this Period -200.00  Prior Period Void 8/28/08
B.	Full Name (Last, First, Middle Initial) Richard Kleinknecht  Mailing Address 28 Plover Lane  City Huntington State NY Zip Code 11743-1038  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73206 Date of Disbursement 09 / 21 / 2009  Amount of Each Disbursement this Period 200.00  Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) Dorothy Koe  Mailing Address Post Office Box 28-0864  City Northridge State CA Zip Code 91328-0864  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73252 Date of Disbursement 09 / 23 / 2009  Amount of Each Disbursement this Period -1825.00  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-1825.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 202 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Dorothy Koe	Transaction ID: SB28A-73278 Date of Disbursement 09 / 24 / 2009
	Mailing Address Post Office Box 28-0864	Amount of Each Disbursement this Period 1825.00
	City Northridge State CA Zip Code 91328-0864	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Steven Koenig	Transaction ID: SB28A-73242 Date of Disbursement 09 / 23 / 2009
	Mailing Address 132 Meeting House Road	Amount of Each Disbursement this Period -2300.00
	City Bedford Corners State NY Zip Code 10549-4241	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Prior Period Void 8/28/08

C.	Full Name (Last, First, Middle Initial) Steven Koenig	Transaction ID: SB28A-73279 Date of Disbursement 09 / 24 / 2009
	Mailing Address 132 Meeting House Road	Amount of Each Disbursement this Period 2300.00
	City Bedford Corners State NY Zip Code 10549-4241	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1825.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 203 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven Kossak  Mailing Address 450 East 52nd Street Apt 2-3  City New York State NY Zip Code 10022-6448  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73190 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 9  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
<b>B.</b>	Full Name (Last, First, Middle Initial) Steven Kossak  Mailing Address 450 East 52nd Street Apt 2-3  City New York State NY Zip Code 10022-6448  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73207 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9  Amount of Each Disbursement this Period 2300.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Douglas Lacey  Mailing Address Post Office Box 1654  City Laredo State TX Zip Code 78044-1654  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73253 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 9  Amount of Each Disbursement this Period -700.00  Prior Period Void 8/28/08

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

-700.00

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

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# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Douglas Lacey <hr/> Mailing Address Post Office Box 1654 <hr/> City Laredo State TX Zip Code 78044-1654 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73280 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 700.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Curtis S. Lane <hr/> Mailing Address 101 Central Park West Apartment 5C <hr/> City New York State NY Zip Code 10023-4250 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73250 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -2300.00 <hr/> Prior Period Void 8/28/08
<b>C.</b>	Full Name (Last, First, Middle Initial) Curtis S. Lane <hr/> Mailing Address 101 Central Park West Apartment 5C <hr/> City New York State NY Zip Code 10023-4250 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73281 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Susan Laporte

Mailing Address 4626 Croftway Court

City State Zip Code  
New Orleans LA 70122

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73395  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
Barbara Lee

Mailing Address 1855 Spindrifft Drive

City State Zip Code  
La Jolla CA 95057

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73251  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Barbara Lee

Mailing Address 1855 Spindrifft Drive

City State Zip Code  
La Jolla CA 95057

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73282  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Cindy Lee  Mailing Address 332 E 29th Street Number 115  City New York State NY Zip Code 10016  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73396 Date of Disbursement 08 / 21 / 2009  Amount of Each Disbursement this Period 5.00  Category/Type
B.	Full Name (Last, First, Middle Initial) Dale Lesinski  Mailing Address 9357 Juniper Place  City Clarence Center State NY Zip Code 14032  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73243 Date of Disbursement 09 / 23 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) Dale Lesinski  Mailing Address 9357 Juniper Place  City Clarence Center State NY Zip Code 14032  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73283 Date of Disbursement 09 / 24 / 2009  Amount of Each Disbursement this Period 2300.00  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Nancy Bey Little Mailing Address 1722 Makiki Street City Honolulu State HI Zip Code 96822-4490 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-72930 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 5.00
<b>B.</b> Full Name (Last, First, Middle Initial) Scott Richard Lord Mailing Address 1717 San Vicente Blvd. City Santa Monica State CA Zip Code 90402-2306 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73405 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
<b>C.</b> Full Name (Last, First, Middle Initial) Scott Richard Lord Mailing Address 1717 San Vicente Blvd. City Santa Monica State CA Zip Code 90402-2306 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73431 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 2300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Susan Disney Lord	Transaction ID: SB28A-73406 Date of Disbursement 09 / 29 / 2009
	Mailing Address 1717 San Vicente Blvd.	Amount of Each Disbursement this Period -2300.00
	City Santa Monica State CA Zip Code 90402-2306	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Susan Disney Lord	Transaction ID: SB28A-73432 Date of Disbursement 09 / 30 / 2009
	Mailing Address 1717 San Vicente Blvd.	Amount of Each Disbursement this Period 2300.00
	City Santa Monica State CA Zip Code 90402-2306	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brandi Lugo	Transaction ID: SB28A-73244 Date of Disbursement 09 / 23 / 2009
	Mailing Address 3219 East Camelback Road Suite 808	Amount of Each Disbursement this Period -10.00
	City Phoenix State AZ Zip Code 85018	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-10.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Brandi Lugo  Mailing Address 3219 East Camelback Road Suite 808  City Phoenix State AZ Zip Code 85018  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73284 Date of Disbursement 09 / 24 / 2009  Amount of Each Disbursement this Period 10.00  Category/ Type
B.	Full Name (Last, First, Middle Initial) William R. Maguire  Mailing Address One Battery Park Plaza  City New York State NY Zip Code 10004  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73407 Date of Disbursement 09 / 29 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) William R. Maguire  Mailing Address One Battery Park Plaza  City New York State NY Zip Code 10004  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73433 Date of Disbursement 09 / 30 / 2009  Amount of Each Disbursement this Period 2300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Vincent Mai	Transaction ID: SB28A-73408 Date of Disbursement 09 / 29 / 2009
	Mailing Address 50 Cornwall Lane	Amount of Each Disbursement this Period -2300.00
	City Port Washington State NY Zip Code 11050-1346	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Vincent Mai	Transaction ID: SB28A-73434 Date of Disbursement 09 / 30 / 2009
	Mailing Address 50 Cornwall Lane	Amount of Each Disbursement this Period 2300.00
	City Port Washington State NY Zip Code 11050-1346	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) William Malpica	Transaction ID: SB28A-73409 Date of Disbursement 09 / 29 / 2009
	Mailing Address 233 Upper Shad Road	Amount of Each Disbursement this Period -100.00
	City Pound Ridge State NY Zip Code 10576	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) William Malpica	Transaction ID: SB28A-73435 Date of Disbursement 09 / 30 / 2009
	Mailing Address 233 Upper Shad Road	Amount of Each Disbursement this Period 100.00
	City Pound Ridge State NY Zip Code 10576	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Gordon McCoun	Transaction ID: SB28A-73245 Date of Disbursement 09 / 23 / 2009
	Mailing Address 444 East 52nd Street Apartment 8F	Amount of Each Disbursement this Period -2300.00
	City New York State NY Zip Code 10022-6446	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	Prior Period Void 8/28/08

C.	Full Name (Last, First, Middle Initial) Gordon McCoun	Transaction ID: SB28A-73285 Date of Disbursement 09 / 24 / 2009
	Mailing Address 444 East 52nd Street Apartment 8F	Amount of Each Disbursement this Period 2300.00
	City New York State NY Zip Code 10022-6446	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Helen Coburn Meier <hr/> Mailing Address 915 Linden Avenue <hr/> City Wilmette State IL Zip Code 60091-2712 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73246 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period -2300.00
	Category/ Type
	Prior Period Void 8/28/08
<b>B.</b> Full Name (Last, First, Middle Initial) Helen Coburn Meier <hr/> Mailing Address 915 Linden Avenue <hr/> City Wilmette State IL Zip Code 60091-2712 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73286 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2300.00
	Category/ Type
	Prior Period Void 8/28/08
<b>C.</b> Full Name (Last, First, Middle Initial) Craig Miller <hr/> Mailing Address 16 Harriman Drive <hr/> City Sands Point State NY Zip Code 11050-1252 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73247 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period -1450.00
	Category/ Type
	Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Craig Miller	Transaction ID: SB28A-73287 Date of Disbursement 09 / 24 / 2009
	Mailing Address 16 Harriman Drive	Amount of Each Disbursement this Period 1450.00
	City Sands Point State NY Zip Code 11050-1252	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Manish Mittal	Transaction ID: SB28A-73248 Date of Disbursement 09 / 23 / 2009
	Mailing Address 170 East 87th Street PH 1C	Amount of Each Disbursement this Period -200.00
	City New York State NY Zip Code 10128-2214	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Prior Period Void 8/28/08

C.	Full Name (Last, First, Middle Initial) Manish Mittal	Transaction ID: SB28A-73288 Date of Disbursement 09 / 24 / 2009
	Mailing Address 170 East 87th Street PH 1C	Amount of Each Disbursement this Period 200.00
	City New York State NY Zip Code 10128-2214	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Hertzl Moezinia

Mailing Address 9 Terrace Court

City State Zip Code  
Old Westbury NY 11568-1301

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73328  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Prior Period Void 8/28/08

B.

Full Name (Last, First, Middle Initial)  
Hertzl Moezinia

Mailing Address 9 Terrace Court

City State Zip Code  
Old Westbury NY 11568-1301

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73347  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)  
Morris Moinian

Mailing Address 380 Madison Avenue  
Suite 241

City State Zip Code  
New York NY 10017-2500

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73249  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Prior Period Void 8/28/08

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Morris Moinian

Transaction ID: SB28A-73289  
Date of Disbursement

Mailing Address 380 Madison Avenue  
Suite 241

/   /

City New York State NY Zip Code 10017-2500

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Daniel T. Moriarity

Transaction ID: SB28A-73254  
Date of Disbursement

Mailing Address 3628 Eden Place

/   /

City Carmel State IN Zip Code 46033-4333

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Daniel T. Moriarity

Transaction ID: SB28A-73290  
Date of Disbursement

Mailing Address 3628 Eden Place

/   /

City Carmel State IN Zip Code 46033-4333

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Richard L. Moriarty	Transaction ID: SB28A-73410 Date of Disbursement 09 / 29 / 2009
	Mailing Address 412 Ridgewood Avenue	Amount of Each Disbursement this Period -2300.00
	City Glen Ridge State NJ Zip Code 07028-1618	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Richard L. Moriarty	Transaction ID: SB28A-73436 Date of Disbursement 09 / 30 / 2009
	Mailing Address 412 Ridgewood Avenue	Amount of Each Disbursement this Period 2300.00
	City Glen Ridge State NJ Zip Code 07028-1618	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Virginia S. Moriarty	Transaction ID: SB28A-73414 Date of Disbursement 09 / 29 / 2009
	Mailing Address 412 Ridgewood Avenue	Amount of Each Disbursement this Period -2300.00
	City Glen Ridge State NJ Zip Code 07028-1618	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Virginia S. Moriarty

Transaction ID: SB28A-73437  
Date of Disbursement

Mailing Address 412 Ridgewood Avenue

/   /

City State Zip Code  
Glen Ridge NJ 07028-1618

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Arvia Morris

Transaction ID: SB28A-72758  
Date of Disbursement

Mailing Address 4535 Thackeray Place, N.E.

/   /

City State Zip Code  
Seattle WA 98105-4841

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
George Munoz

Transaction ID: SB28A-73255  
Date of Disbursement

Mailing Address 2111 Wilson Boulevard  
Suite 850

/   /

City State Zip Code  
Arlington VA 22201-3001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Prior Period Void 8/28/08

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) George Munoz  Mailing Address 2111 Wilson Boulevard Suite 850  City Arlington State VA Zip Code 22201-3001  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73291 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 2300.00
B.	Full Name (Last, First, Middle Initial) David Muschel  Mailing Address 181 East Linden Avenue  City Englewood State NJ Zip Code 07631-3621  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73256 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 9  Amount of Each Disbursement this Period -700.00  Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) David Muschel  Mailing Address 181 East Linden Avenue  City Englewood State NJ Zip Code 07631-3621  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73292 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 700.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Marie Kaiser Napoli	Transaction ID: SB28A-73415 Date of Disbursement 09 / 29 / 2009
	Mailing Address 1985-4 Cedar Swamp Road	Amount of Each Disbursement this Period -2300.00
	City Brookville State NY Zip Code 11545	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Marie Kaiser Napoli	Transaction ID: SB28A-73438 Date of Disbursement 09 / 30 / 2009
	Mailing Address 1985-4 Cedar Swamp Road	Amount of Each Disbursement this Period 2300.00
	City Brookville State NY Zip Code 11545	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paul Napoli	Transaction ID: SB28A-73416 Date of Disbursement 09 / 29 / 2009
	Mailing Address 1985-4 Cedar Swamp Road	Amount of Each Disbursement this Period -2300.00
	City Brookville State NY Zip Code 11545	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Paul Napoli

Transaction ID: SB28A-73439  
Date of Disbursement

Mailing Address 1985-4 Cedar Swamp Road

/   /

City State Zip Code  
Brookville NY 11545

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
Anne Nobles

Transaction ID: SB28A-73257  
Date of Disbursement

Mailing Address 8801 Worthington Court

/   /

City State Zip Code  
Indianapolis IN 46278-1179

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Anne Nobles

Transaction ID: SB28A-73293  
Date of Disbursement

Mailing Address 8801 Worthington Court

/   /

City State Zip Code  
Indianapolis IN 46278-1179

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.**

Full Name (Last, First, Middle Initial)  
Ronald Oehl

Mailing Address 8 West 40th Street  
17th Floor

City New York State NY Zip Code 10018

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB28A-73336  
**Date of Disbursement:** 09 / 25 / 2009

Amount of Each Disbursement this Period  
-2300.00

Prior Period Void 8/28/08

**B.**

Full Name (Last, First, Middle Initial)  
Ronald Oehl

Mailing Address 8 West 40th Street  
17th Floor

City New York State NY Zip Code 10018

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB28A-73348  
**Date of Disbursement:** 09 / 25 / 2009

Amount of Each Disbursement this Period  
2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen C. Osterholm

Mailing Address Post Office Box 9742

City College Station State TX Zip Code 77842-7742

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB28A-73258  
**Date of Disbursement:** 09 / 23 / 2009

Amount of Each Disbursement this Period  
-525.00

Prior Period Void 8/28/08

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **-525.00**

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Karen C. Osterholm

Transaction ID: SB28A-73294  
Date of Disbursement

Mailing Address Post Office Box 9742

/   /

City State Zip Code  
College Station TX 77842-7742

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Patricia Palermo

Transaction ID: SB28A-72757  
Date of Disbursement

Mailing Address 115 East 87th Street  
Apartment 32A

/   /

City State Zip Code  
New York NY 10128-1140

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Agopie Pappas

Transaction ID: SB28A-73329  
Date of Disbursement

Mailing Address 7604 Muller Street

/   /

City State Zip Code  
Downey CA 90241-2114

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 8/28/08

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Agopie Pappas <hr/> Mailing Address 7604 Muller Street <hr/> City Downey State CA Zip Code 90241-2114 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73349 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2300.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Harry L. Pappas <hr/> Mailing Address 7604 Muller Street <hr/> City Downey State CA Zip Code 90241-2114 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73330 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -75.00 <hr/> Prior Period Void 8/28/08
<b>C.</b>	Full Name (Last, First, Middle Initial) Harry L. Pappas <hr/> Mailing Address 7604 Muller Street <hr/> City Downey State CA Zip Code 90241-2114 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73350 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 75.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Sydney Passin	Transaction ID: SB28A-73259 Date of Disbursement 09 / 23 / 2009
	Mailing Address 2112 Broadway Apartment 7B	Amount of Each Disbursement this Period -2300.00
	City New York State NY Zip Code 10024-4079	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Sydney Passin	Transaction ID: SB28A-73295 Date of Disbursement 09 / 24 / 2009
	Mailing Address 2112 Broadway Apartment 7B	Amount of Each Disbursement this Period 2300.00
	City New York State NY Zip Code 10024-4079	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gregory Paterno	Transaction ID: SB28A-73260 Date of Disbursement 09 / 23 / 2009
	Mailing Address 22315 Lull Street	Amount of Each Disbursement this Period -2300.00
	City Canoga Park State CA Zip Code 91304-5504	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Gregory Paterno

Mailing Address 22315 Lull Street

City State Zip Code  
Canoga Park CA 91304-5504

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73296  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
John C. Paulsen

Mailing Address 13021 South 83rd Court

City State Zip Code  
Palos Park IL 60464-2144

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73261  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
John C. Paulsen

Mailing Address 13021 South 83rd Court

City State Zip Code  
Palos Park IL 60464-2144

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73297  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Karla Perez

Transaction ID: SB28A-73535  
Date of Disbursement

Mailing Address 2209 Paiute Meadows Drive

09 / 17 / 2009

City State Zip Code  
Las Vegas NV 89134-6733

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

5.00

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Elizabeth B. Perik

Transaction ID: SB28A-73331  
Date of Disbursement

Mailing Address 10 High Street

09 / 25 / 2009

City State Zip Code  
Jamestown RI 02835

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

-2300.00

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Elizabeth B. Perik

Transaction ID: SB28A-73351  
Date of Disbursement

Mailing Address 10 High Street

09 / 25 / 2009

City State Zip Code  
Jamestown RI 02835

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

2300.00

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

5.00

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 227 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Harriet Peterson	Transaction ID: SB28A-73298 Date of Disbursement 09 / 24 / 2009
	Mailing Address 10000 Wornall Road Apartment 120	Amount of Each Disbursement this Period -1035.00
	City Kansas City State MO Zip Code 64114-4359	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Harriet Peterson	Transaction ID: SB28A-73352 Date of Disbursement 09 / 25 / 2009
	Mailing Address 10000 Wornall Road Apartment 120	Amount of Each Disbursement this Period 1035.00
	City Kansas City State MO Zip Code 64114-4359	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Margaret M. Pettit	Transaction ID: SB28A-73310 Date of Disbursement 09 / 24 / 2009
	Mailing Address 13370 Biscayne Bay Terrace	Amount of Each Disbursement this Period -2300.00
	City North Miami State FL Zip Code 33181	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 228 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Margaret M. Pettit

Transaction ID: SB28A-73353  
Date of Disbursement

Mailing Address 13370 Biscayne Bay Terrace

/   /

City State Zip Code  
North Miami FL 33181

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Penney Phipps

Transaction ID: SB28A-73191  
Date of Disbursement

Mailing Address 10847 Lincoln Drive

/   /

City State Zip Code  
Huntington Woods MI 48070-1544

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Penney Phipps

Transaction ID: SB28A-73208  
Date of Disbursement

Mailing Address 10847 Lincoln Drive

/   /

City State Zip Code  
Huntington Woods MI 48070-1544

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Deepika R. Ramchandani	Transaction ID: SB28A-73192 Date of Disbursement 09 / 18 / 2009
	Mailing Address 11 Quail Run	Amount of Each Disbursement this Period -2300.00
	City Old Westbury State NY Zip Code 11568-1044	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Deepika R. Ramchandani	Transaction ID: SB28A-73209 Date of Disbursement 09 / 21 / 2009
	Mailing Address 11 Quail Run	Amount of Each Disbursement this Period 2300.00
	City Old Westbury State NY Zip Code 11568-1044	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rattan R. Ramchandani	Transaction ID: SB28A-73193 Date of Disbursement 09 / 18 / 2009
	Mailing Address 11 Quail Run	Amount of Each Disbursement this Period -2300.00
	City Old Westbury State NY Zip Code 11568-1044	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 230 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Rattan R. Ramchandani

Transaction ID: SB28A-73210  
Date of Disbursement

Mailing Address 11 Quail Run

/   /

City State Zip Code  
Old Westbury NY 11568-1044

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Sangeeta Ramchandani

Transaction ID: SB28A-73194  
Date of Disbursement

Mailing Address 11 Quail Run

/   /

City State Zip Code  
Old Westbury NY 11568-1044

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Sangeeta Ramchandani

Transaction ID: SB28A-73211  
Date of Disbursement

Mailing Address 11 Quail Run

/   /

City State Zip Code  
Old Westbury NY 11568-1044

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 231 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Alisa Ratner	Transaction ID: SB28A-73332 Date of Disbursement 09 / 25 / 2009
	Mailing Address 1119 Las Pulgas Place	Amount of Each Disbursement this Period -2300.00
	City Pacific Palisades State CA Zip Code 90272-2440	Category/ Type
	Purpose of Disbursement Refund	
	Candidate Name	Prior Period Void 8/28/08
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alisa Ratner	Transaction ID: SB28A-73354 Date of Disbursement 09 / 25 / 2009
	Mailing Address 1119 Las Pulgas Place	Amount of Each Disbursement this Period 2300.00
	City Pacific Palisades State CA Zip Code 90272-2440	Category/ Type
	Purpose of Disbursement Refund	
	Candidate Name	Prior Period Void 8/28/08
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kevin Ratner	Transaction ID: SB28A-73333 Date of Disbursement 09 / 25 / 2009
	Mailing Address 1119 Las Pulgas Place	Amount of Each Disbursement this Period -2300.00
	City Pacific Palisades State CA Zip Code 90272-2440	Category/ Type
	Purpose of Disbursement Refund	
	Candidate Name	Prior Period Void 8/28/08
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 232 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Kevin Ratner  Mailing Address 1119 Las Pulgas Place  City Pacific Palisades State CA Zip Code 90272-2440  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73355 Date of Disbursement 09 / 25 / 2009  Amount of Each Disbursement this Period 2300.00  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Kathleen Reeve  Mailing Address 2439 Meridia Avenue  City San Jose State CA Zip Code 95124  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73394 Date of Disbursement 08 / 07 / 2009  Amount of Each Disbursement this Period 15.00  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Peder M. Regan  Mailing Address 20 River Terrace Apartment 3E  City New York State NY Zip Code 10282  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73337 Date of Disbursement 09 / 25 / 2009  Amount of Each Disbursement this Period -2300.00  Category/Type  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 233 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Peder M. Regan

Transaction ID: SB28A-73356  
Date of Disbursement

Mailing Address 20 River Terrace  
Apartment 3E

/   /

City New York State NY Zip Code 10282

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Barbara Resnek

Transaction ID: SB28A-73308  
Date of Disbursement

Mailing Address 51 Pickwick Road

/   /

City West Newton State MA Zip Code 02465-2818

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 8/28/08

C.

Full Name (Last, First, Middle Initial)  
Barbara Resnek

Transaction ID: SB28A-73357  
Date of Disbursement

Mailing Address 51 Pickwick Road

/   /

City West Newton State MA Zip Code 02465-2818

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 234 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Catherine Asif Rhem	Transaction ID: SB28A-73299
	Mailing Address 15360 Oak Point Drive	Date of Disbursement MM / DD / YYYY 09 / 24 / 2009
	City Spring Lake State MI Zip Code 49456-2197	Amount of Each Disbursement this Period -1.00
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Catherine Asif Rhem	Transaction ID: SB28A-73358
	Mailing Address 15360 Oak Point Drive	Date of Disbursement MM / DD / YYYY 09 / 25 / 2009
	City Spring Lake State MI Zip Code 49456-2197	Amount of Each Disbursement this Period 1.00
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) Anne Riney	Transaction ID: SB28A-73309
	Mailing Address 225 East 46th Street Penthouse C	Date of Disbursement MM / DD / YYYY 09 / 24 / 2009
	City New York State NY Zip Code 10017	Amount of Each Disbursement this Period -50.00
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-50.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 235 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

**A.**

Full Name (Last, First, Middle Initial) Anne Riney		<b>Transaction ID:</b> SB28A-73359	
Mailing Address 225 East 46th Street Penthouse C		Date of Disbursement 09 / 25 / 2009	
City New York	State NY	Zip Code 10017	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement Refund		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

**B.**

Full Name (Last, First, Middle Initial) Mary Ann Rinker		<b>Transaction ID:</b> SB28A-73536	
Mailing Address 5381 Grantsville Grove Apt G10		Date of Disbursement 09 / 02 / 2009	
City Colorado Springs	State CO	Zip Code 80922	Amount of Each Disbursement this Period 5.00
Purpose of Disbursement Refund		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

**C.**

Full Name (Last, First, Middle Initial) Brandon Rose		<b>Transaction ID:</b> SB28A-73417	
Mailing Address 6 Lincoln Avenue		Date of Disbursement 09 / 29 / 2009	
City Greenwich	State CT	Zip Code 06830-5751	Amount of Each Disbursement this Period -2300.00
Purpose of Disbursement Refund		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Prior Period Void 8/28/08		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2245.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Ellen Roswall	Transaction ID: SB28A-73387
	Mailing Address 1385 28th Street	Date of Disbursement 07 / 31 / 2009
	City Huntington State WV Zip Code 25705	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ellen Roswall	Transaction ID: SB28A-73391
	Mailing Address 1385 28th Street	Date of Disbursement 08 / 03 / 2009
	City Huntington State WV Zip Code 25705	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ellen Roswall	Transaction ID: SB28A-73534
	Mailing Address 1385 28th Street	Date of Disbursement 09 / 09 / 2009
	City Huntington State WV Zip Code 25705	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Carl Rothman <hr/> Mailing Address 2529 Kerry Lane <hr/> City Bellmore State NY Zip Code 11710-5103 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73301 Date of Disbursement 09 / 24 / 2009 <hr/> Amount of Each Disbursement this Period -2300.00 <hr/> Prior Period Void 8/28/08
B.	Full Name (Last, First, Middle Initial) Carl Rothman <hr/> Mailing Address 2529 Kerry Lane <hr/> City Bellmore State NY Zip Code 11710-5103 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73361 Date of Disbursement 09 / 25 / 2009 <hr/> Amount of Each Disbursement this Period 2300.00 <hr/> Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) Paula Rothman <hr/> Mailing Address 2529 Kerry Lane <hr/> City Bellmore State NY Zip Code 11710-5103 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73302 Date of Disbursement 09 / 24 / 2009 <hr/> Amount of Each Disbursement this Period -2300.00 <hr/> Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Paula Rothman Mailing Address 2529 Kerry Lane City Bellmore State NY Zip Code 11710-5103 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73362 Date of Disbursement 09 / 25 / 2009 Amount of Each Disbursement this Period 2300.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Amanda Russekoff Mailing Address 37 Burying Hill Road City Greenwich State CT Zip Code 06830 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73418 Date of Disbursement 09 / 29 / 2009 Amount of Each Disbursement this Period -2300.00 Category/Type Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) Amanda Russekoff Mailing Address 37 Burying Hill Road City Greenwich State CT Zip Code 06830 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73441 Date of Disbursement 09 / 30 / 2009 Amount of Each Disbursement this Period 2300.00 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) David Russekoff  Mailing Address 37 Burying Hill Road  City Greenwich State CT Zip Code 06830  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73419 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
<b>B.</b>	Full Name (Last, First, Middle Initial) David Russekoff  Mailing Address 37 Burying Hill Road  City Greenwich State CT Zip Code 06830  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73442 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 2300.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Roger Ryan  Mailing Address 100 Chris Dr  City Hawkinsville State GA Zip Code 31036-9643  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-72958 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period -145.08  Prior Period Void 9/30/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-145.08
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Shirley S. Sagawa	Transaction ID: SB28A-73195 Date of Disbursement 09 / 18 / 2009
	Mailing Address 3000 Greenvale Road	Amount of Each Disbursement this Period -2300.00
	City Chevy Chase State MD Zip Code 20815-3125	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Shirley S. Sagawa	Transaction ID: SB28A-73212 Date of Disbursement 09 / 21 / 2009
	Mailing Address 3000 Greenvale Road	Amount of Each Disbursement this Period 2300.00
	City Chevy Chase State MD Zip Code 20815-3125	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Oleg J. Samilenko	Transaction ID: SB28A-73338 Date of Disbursement 09 / 25 / 2009
	Mailing Address 23 Count Rumford Lane	Amount of Each Disbursement this Period -2300.00
	City Lloyd Harbor State NY Zip Code 11743-9770	
	Purpose of Disbursement Refund	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Oleg J. Samilenko <hr/> Mailing Address 23 Count Rumford Lane <hr/> City Lloyd Harbor State NY Zip Code 11743-9770 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73363 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2300.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Deborah H. Schultz <hr/> Mailing Address 35 Tommy's Lane <hr/> City New Canaan State CT Zip Code 06840 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73303 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
<b>C.</b>	Full Name (Last, First, Middle Initial) Deborah H. Schultz <hr/> Mailing Address 35 Tommy's Lane <hr/> City New Canaan State CT Zip Code 06840 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-73364 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Amram Schwab  Mailing Address 12 Moccasin Place  City Monsey State NY Zip Code 10952  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73304 Date of Disbursement 09 / 24 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
B.	Full Name (Last, First, Middle Initial) Amram Schwab  Mailing Address 12 Moccasin Place  City Monsey State NY Zip Code 10952  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73365 Date of Disbursement 09 / 25 / 2009  Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Elizabeth Sherwood-Randall  Mailing Address 45 Sierra Ave  City Piedmont State CA Zip Code 94611  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73530 Date of Disbursement 09 / 30 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08

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

-2300.00

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Elizabeth Smith-Malik	Transaction ID: SB28A-73305 Date of Disbursement 09 / 24 / 2009
	Mailing Address 700 Park Avenue Penthouse B	Amount of Each Disbursement this Period -2300.00
	City New York State NY Zip Code 10021-4900	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Elizabeth Smith-Malik	Transaction ID: SB28A-73366 Date of Disbursement 09 / 25 / 2009
	Mailing Address 700 Park Avenue Penthouse B	Amount of Each Disbursement this Period 2300.00
	City New York State NY Zip Code 10021-4900	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Judith L. Spanier	Transaction ID: SB28A-73306 Date of Disbursement 09 / 24 / 2009
	Mailing Address 90 Walworth Avenue	Amount of Each Disbursement this Period -2300.00
	City Scarsdale State NY Zip Code 10583	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Judith L. Spanier	<b>Transaction ID:</b> SB28A-73367 Date of Disbursement
	Mailing Address 90 Walworth Avenue	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City Scarsdale State NY Zip Code 10583	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund	<input type="text" value="2300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) Jerry Speyer	<b>Transaction ID:</b> SB28A-73307 Date of Disbursement
	Mailing Address 45 Rockefeller Plaza 7th Floor	<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City New York State NY Zip Code 10111	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund	<input type="text" value="-2300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Prior Period Void 8/28/08

C.	Full Name (Last, First, Middle Initial) Jerry Speyer	<b>Transaction ID:</b> SB28A-73368 Date of Disbursement
	Mailing Address 45 Rockefeller Plaza 7th Floor	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City New York State NY Zip Code 10111	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund	<input type="text" value="2300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2300.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Susan S. Stanley  Mailing Address 35 East 12th Street Apartment 9C  City New York State NY Zip Code 10003  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73311 Date of Disbursement 09 / 24 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
B.	Full Name (Last, First, Middle Initial) Susan S. Stanley  Mailing Address 35 East 12th Street Apartment 9C  City New York State NY Zip Code 10003  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73369 Date of Disbursement 09 / 25 / 2009  Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Lynne Stark  Mailing Address 11 Knapp Road  City South Salem State NY Zip Code 10590-1016  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73312 Date of Disbursement 09 / 24 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Lynne Stark

Transaction ID: SB28A-73370  
Date of Disbursement

Mailing Address 11 Knapp Road

/   /

City State Zip Code  
South Salem NY 10590-1016

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Nina Starr

Transaction ID: SB28A-73392  
Date of Disbursement

Mailing Address 1025 Kalo Place

/   /

City State Zip Code  
Honolulu HI 96826

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Evan Steen

Transaction ID: SB28A-73313  
Date of Disbursement

Mailing Address 320 Park Avenue  
9th Floor

/   /

City State Zip Code  
New York NY 10022-7401

Amount of Each Disbursement this Period

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Prior Period Void 8/28/08

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

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

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Evan Steen  Mailing Address 320 Park Avenue 9th Floor  City New York State NY Zip Code 10022-7401  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73371 Date of Disbursement 09 / 25 / 2009  Amount of Each Disbursement this Period 2300.00  Category/ Type
B.	Full Name (Last, First, Middle Initial) Gus Steyer  Mailing Address 3030 Pacific Avenue  City San Francisco State CA Zip Code 94115-1014  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73314 Date of Disbursement 09 / 24 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) Gus Steyer  Mailing Address 3030 Pacific Avenue  City San Francisco State CA Zip Code 94115-1014  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73372 Date of Disbursement 09 / 25 / 2009  Amount of Each Disbursement this Period 2300.00  Category/ Type

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

2300.00

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



**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Samuel Steyer <hr/> Mailing Address 3030 Pacific Avenue <hr/> City San Francisco State CA Zip Code 94115-1014 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 	<b>Transaction ID:</b> SB28A-73315 <b>Date of Disbursement:</b> <div style="border: 1px solid black; padding: 2px;">                         M M / D D / Y Y Y Y                          0 9 / 2 4 / 2 0 0 9                     </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">-2300.00</div> <hr/> Prior Period Void 8/28/08
<b>B.</b>	Full Name (Last, First, Middle Initial) Samuel Steyer <hr/> Mailing Address 3030 Pacific Avenue <hr/> City San Francisco State CA Zip Code 94115-1014 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 	<b>Transaction ID:</b> SB28A-73373 <b>Date of Disbursement:</b> <div style="border: 1px solid black; padding: 2px;">                         M M / D D / Y Y Y Y                          0 9 / 2 5 / 2 0 0 9                     </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">2300.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth Stone <hr/> Mailing Address 97 Montclair Avenue <hr/> City Montclair State NJ Zip Code 07042-4128 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 	<b>Transaction ID:</b> SB28A-73386 <b>Date of Disbursement:</b> <div style="border: 1px solid black; padding: 2px;">                         M M / D D / Y Y Y Y                          0 7 / 2 3 / 2 0 0 9                     </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">50.00</div>

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

50.00

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b> Full Name (Last, First, Middle Initial) Jay Scott Sugarman  Mailing Address 1 Central Park West Penthouse  City New York State NY Zip Code 10023-7703  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73316 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08

<b>B.</b> Full Name (Last, First, Middle Initial) Jay Scott Sugarman  Mailing Address 1 Central Park West Penthouse  City New York State NY Zip Code 10023-7703  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73374 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 2300.00

<b>C.</b> Full Name (Last, First, Middle Initial) Amy Tan  Mailing Address 3450 Sacramento Street Number 617  City San Francisco State CA Zip Code 94118-1914  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73317 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Amy Tan Mailing Address 3450 Sacramento Street Number 617 City San Francisco State CA Zip Code 94118-1914 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73375 Date of Disbursement 09 / 25 / 2009 Amount of Each Disbursement this Period 2300.00 Category/Type
B.	Full Name (Last, First, Middle Initial) David S. Taub Mailing Address 48 Harbor Park Drive City Prt Washingtn State NY Zip Code 11050-4653 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73322 Date of Disbursement 09 / 24 / 2009 Amount of Each Disbursement this Period -2300.00 Category/Type Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) David S. Taub Mailing Address 48 Harbor Park Drive City Prt Washingtn State NY Zip Code 11050-4653 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73376 Date of Disbursement 09 / 25 / 2009 Amount of Each Disbursement this Period 2300.00 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Mary Ann Tauro <hr/> Mailing Address 620 Sophia Court <hr/> City Niles State OH Zip Code 44446-3827 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73318 Date of Disbursement 09 / 24 / 2009 <hr/> Amount of Each Disbursement this Period -200.00 <hr/> Prior Period Void 8/28/08
B.	Full Name (Last, First, Middle Initial) Mary Ann Tauro <hr/> Mailing Address 620 Sophia Court <hr/> City Niles State OH Zip Code 44446-3827 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73377 Date of Disbursement 09 / 25 / 2009 <hr/> Amount of Each Disbursement this Period 200.00 <hr/> Prior Period Void 8/28/08
C.	Full Name (Last, First, Middle Initial) Pamela L. Troyer <hr/> Mailing Address 741 Kearney Street <hr/> City Denver State CO Zip Code 80220-5325 <hr/> Purpose of Disbursement Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73319 Date of Disbursement 09 / 24 / 2009 <hr/> Amount of Each Disbursement this Period -2300.00 <hr/> Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Pamela L. Troyer	Transaction ID: SB28A-73378 Date of Disbursement 09 / 25 / 2009
	Mailing Address 741 Kearney Street	Amount of Each Disbursement this Period 2300.00
	City Denver State CO Zip Code 80220-5325	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Robert C. Troyer	Transaction ID: SB28A-73320 Date of Disbursement 09 / 24 / 2009
	Mailing Address 741 Kearney Street	Amount of Each Disbursement this Period -2300.00
	City Denver State CO Zip Code 80220-5325	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Prior Period Void 8/28/08

C.	Full Name (Last, First, Middle Initial) Robert C. Troyer	Transaction ID: SB28A-73379 Date of Disbursement 09 / 25 / 2009
	Mailing Address 741 Kearney Street	Amount of Each Disbursement this Period 2300.00
	City Denver State CO Zip Code 80220-5325	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 254 / 263

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Lady Va Maughan	Transaction ID: SB28A-73531 Date of Disbursement 09 / 30 / 2009
	Mailing Address 730 Park Ave	Amount of Each Disbursement this Period -2300.00
	City New York State NY Zip Code 10021-4945	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Christina Von Dorrer Hildebrand	Transaction ID: SB28A-73340 Date of Disbursement 09 / 25 / 2009
	Mailing Address 2421 Saint Lawrence Drive	Amount of Each Disbursement this Period -200.00
	City San Jose State CA Zip Code 95124-1339	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

C.	Full Name (Last, First, Middle Initial) Christina Von Dorrer Hildebrand	Transaction ID: SB28A-73380 Date of Disbursement 09 / 25 / 2009
	Mailing Address 2421 Saint Lawrence Drive	Amount of Each Disbursement this Period 200.00
	City San Jose State CA Zip Code 95124-1339	
	Purpose of Disbursement Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Richard Wiener  Mailing Address 215 East 80th Street Apartment 2K  City New York State NY Zip Code 10075  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73420 Date of Disbursement 09 / 29 / 2009  Amount of Each Disbursement this Period -2300.00  Prior Period Void 8/28/08
B.	Full Name (Last, First, Middle Initial) Richard Wiener  Mailing Address 215 East 80th Street Apartment 2K  City New York State NY Zip Code 10075  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73443 Date of Disbursement 09 / 30 / 2009  Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Robert Wiglesworth  Mailing Address 820 Sycamore Avenue Number 212  City Vista State CA Zip Code 92081  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73388 Date of Disbursement 07 / 31 / 2009  Amount of Each Disbursement this Period 5.00

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

5.00

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

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Don Willis	Transaction ID: SB28A-73321 Date of Disbursement 09 / 24 / 2009
	Mailing Address 20191 Tranquil Lane	Amount of Each Disbursement this Period -500.00
	City Huntington Beach State CA Zip Code 92646-4652	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Don Willis	Transaction ID: SB28A-73381 Date of Disbursement 09 / 25 / 2009
	Mailing Address 20191 Tranquil Lane	Amount of Each Disbursement this Period 500.00
	City Huntington Beach State CA Zip Code 92646-4652	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) William Wu	Transaction ID: SB28A-73339 Date of Disbursement 09 / 25 / 2009
	Mailing Address 607 East Norman Avenue	Amount of Each Disbursement this Period -2300.00
	City Arcadia State CA Zip Code 91006-4806	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-2300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) William Wu  Mailing Address 607 East Norman Avenue  City Arcadia State CA Zip Code 91006-4806  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-73382 Date of Disbursement 09 / 25 / 2009  Amount of Each Disbursement this Period 2300.00  Category/Type
B.	Full Name (Last, First, Middle Initial) Mallun Yen  Mailing Address 25960 Estacada Drive  City Los Altos Hills State CA Zip Code 94022  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-72988 Date of Disbursement 08 / 04 / 2009  Amount of Each Disbursement this Period 100.00  Category/Type
C.	Full Name (Last, First, Middle Initial) Mallun Yen  Mailing Address 25960 Estacada Drive  City Los Altos Hills State CA Zip Code 94022  Purpose of Disbursement Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-72989 Date of Disbursement 08 / 04 / 2009  Amount of Each Disbursement this Period 2300.00  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Michel Zaleski	Transaction ID: SB28A-73421 Date of Disbursement 09 / 29 / 2009
	Mailing Address 300 Central Park West Apartment 29D	Amount of Each Disbursement this Period -1900.00
	City New York State NY Zip Code 10024-1513	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

B.	Full Name (Last, First, Middle Initial) Michel Zaleski	Transaction ID: SB28A-73444 Date of Disbursement 09 / 30 / 2009
	Mailing Address 300 Central Park West Apartment 29D	Amount of Each Disbursement this Period 1900.00
	City New York State NY Zip Code 10024-1513	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jacqueline Zins	Transaction ID: SB28A-73196 Date of Disbursement 09 / 18 / 2009
	Mailing Address 5101 Van Ness Street, N.W.	Amount of Each Disbursement this Period -20.00
	City Washington State DC Zip Code 20016-1919	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Prior Period Void 8/28/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-20.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.

Full Name (Last, First, Middle Initial)  
Jacqueline Zins

Mailing Address 5101 Van Ness Street, N.W.

City Washington State DC Zip Code 20016-1919

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73213  
Date of Disbursement

09 / 21 / 2009

Amount of Each Disbursement this Period

20.00

B.

Full Name (Last, First, Middle Initial)  
Michael Zuza

Mailing Address 309 76th St

City North Bergen State NJ Zip Code 07047-5613

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-73529  
Date of Disbursement

09 / 30 / 2009

Amount of Each Disbursement this Period

-1421.00

Prior Period Void 8/28/08

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

-1401.00

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

-961.08

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Iowa Democratic Party  Mailing Address 420 Watson Powell Parkway  City Des Moines State IA Zip Code 50309  Purpose of Disbursement Media Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-73087 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period -212.00  Prior Period Void 6/11/08
<b>B.</b>	Full Name (Last, First, Middle Initial) Iowa Democratic Party  Mailing Address 420 Watson Powell Parkway  City Des Moines State IA Zip Code 50309  Purpose of Disbursement Media Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-73131 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period 212.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Iowa Democratic Party State Account  Mailing Address 5661 Fleur Drive  City Des Moines State IA Zip Code 50321  Purpose of Disbursement Contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-73088 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 9  Amount of Each Disbursement this Period -265.00  Prior Period Void 5/20/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-265.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Iowa Democratic Party State Account  Mailing Address 5661 Fleur Drive  City Des Moines State IA Zip Code 50321  Purpose of Disbursement Media  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: SB29-73132 Date of Disbursement 08 / 28 / 2009  Amount of Each Disbursement this Period 265.00  Category/ Type
B.	Full Name (Last, First, Middle Initial) Texas Democratic Party  Mailing Address 505 West 12th Street Suite 200  City Austin State TX Zip Code 78701  Purpose of Disbursement Event Expense: Decorations  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: SB29-72972 Date of Disbursement 07 / 29 / 2009  Amount of Each Disbursement this Period -500.00  Prior Period Void 6/4/08
C.	Full Name (Last, First, Middle Initial) Texas Democratic Party  Mailing Address 505 West 12th Street Suite 200  City Austin State TX Zip Code 78701  Purpose of Disbursement Event Expense: Decorations  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: SB29-72985 Date of Disbursement 07 / 31 / 2009  Amount of Each Disbursement this Period 500.00  Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	265.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Hillary Clinton for President

A.	Full Name (Last, First, Middle Initial) Urban League Young Profess.	Transaction ID: SB29-73076
	Mailing Address 930 West Owens	Date of Disbursement MM / DD / YYYY 08 / 27 / 2009
	City Las Vegas State NV Zip Code 89106	Amount of Each Disbursement this Period -100.00
	Purpose of Disbursement Contribution Candidate Name	Prior Period Void 01/07/08
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Urban League Young Profess.	Transaction ID: SB29-73099
	Mailing Address 930 West Owens	Date of Disbursement MM / DD / YYYY 08 / 28 / 2009
	City Las Vegas State NV Zip Code 89106	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Contribution Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	0.00

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  
 (check only one)

11  
 12

NAME OF COMMITTEE (In Full)  
 Hillary Clinton for President

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Penn, Schoen & Berland Assoc. LLC

Nature of Debt (Purpose):  
 Consulting Polling/ Mail Expenses

Mailing Address Post Office Box 758827

City State ZIP Code  
 Baltimore MD 21275-8827

Outstanding Balance Beginning This Period

1500166.61

Transaction ID: SD-38321

Amount Incurred This Period

0.00

Payment This Period

504666.61

Outstanding Balance at Close of This Period

995500.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

995500.00

2) **TOTALS** This Period (last page this line number only)..... ▶

995500.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

995500.00