10/21/2010 10:14

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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT 430 SOUTH CAPITOL STREET SE ADDRESS (number and street) Check if different than previously WASHINGTON DC 20003 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00460147 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day Х (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 10 0 1 2010 10 13 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **ANDREW TOBIAS** Type or Print Name of Treasurer Electronically Filed by **ANDREW TOBIAS** 10 2 1 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/32

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT D D 0 1 10 2010 10 13 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 346040.89 January 1 (b) Cash on Hand at 1315144.88 Begining of Reporting Period ..... 214697.12 2089632.89 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1529842.00 2435673.78 6(a) and 6(c) for Column B) ..... 234119.10 1139950.88 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 1295722.90 1295722.90 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

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

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 32

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Report Covering the Period: From:

M M M 10 01 Y Y W Y
2010

To: M M M 10 13 Y Y Y Y
2010

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	214697.12	2089632.89
10.	to Federal candidates and Other Political Committees	0.00	0.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18.	Transfers from Non-Federal and Levin Funds  (a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	214697.12	2089632.89
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	214697.12	2089632.89

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4/32

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	234119.10	1139950.88
(c) Total Operating Expenditures	004440.40	1100050.00
(add 21(a)(i), (a)(ii) and (b))	234119.10	1139950.88
2. Transfers to Affiliated/Other Party  Committees	0.00	0.00
Contributions to	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	0.00	0.00
I. Independent Expenditure		
(use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party	2.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
N. Leve Bergerente Mede	0.00	0.00
S. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
B. Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
man Political Committees		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements	0.00	0.00
. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	234119.10	1139950.88
2. Total Federal Disbursements		
(a) btract Line 01(a)(ii) and Line 20(a)(ii)		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	234119.10	1139950.88

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 32

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	otal Contributions (other than loans) rom Line 11(d), page 3)	0.00	0.00
	otal Contribution Refunds	0.00	0.00
	let Contributions (other than loans) subtract Line 34 from Line 33)	0.00	0.00
	otal Federal Operating Expenditures add Line 21(a)(i) and Line 21(b))	234119.10	1139950.88
	Offsets to Operating Expenditures from Line 15, page 3)	214697.12	2089632.89
	let Operating Expenditures subtract Line 37 from Line 36)	19421.98	-949682.01

FE6AN026

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 commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial)  Denny Heck for Congress  Mailing Address 603 Stewart Street, #819  City State Zip Code Seattle WA 98101  FEC ID number of contributing federal political committee.  Name of Employer  Formany General Other (specify) ▼ 12000.00  Full Name (Last, First, Middle Initial)  WASHINGTON DEMOCRATIC PARTY  Mailing Address PO Box 4027  City State Zip Code WA 98194  FEC ID number of contributing federal political committee.  Name of Employer  PEC ID number of contributing federal political committee.  Name of Employer  PEC ID number of contributing federal political committee.  Name of Employer  Primary General Other (specify) ▼ 12000.00  Full Name (Last, First, Middle Initial)  Sirickland for Governor  Mailing Address 65 E State Street, Suite 1800  City State Zip Code Primary General Other (specify) ▼ 12000.00  Pale of Receipt For:  Primary General Other (specify) ▼ 12000.00  Date of Receipt For:  Primary General Other (specify) ▼ 12000.00  Aggregate Year-to-Date ▼ 12000.00  SubtrottAL of Receipt This Page (optional)  SubtrottAL of Receipts This Page (optional)	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne (crieck drilly drie)
Date of Receipt    State	NAME OF COMMITTEE (In Full)		
Receipt For:	Denny Heck for Congress  Mailing Address 603 Stewart Street, #8  City  Seattle  FEC ID number of contributing	State Zip Code WA 98101	Transaction ID: SA15-1473  Amount of Each Receipt this Period
Mailing Address PO Box 4027  City State Zip Code WA 98194  FEC ID number of contributing tederal political committee.  Name of Employer  City State Zip Code WA 98194  Full Name (Last, First, Middle Initial) Strickland for Governor Mailing Address 65 E State Street, Suite 1800  City State Zip Code Date of Receipt  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: SA15-1472  Amount of Each Receipt this Period  Date of Receipt  12000.00  Date of Receipt  Transaction ID: SA15-1471  Amount of Each Receipt Transaction ID: SA15-1471	Receipt For:  Primary General	Aggregate Year-to-Date ▼	
FEC ID number of contributing federal political committee.  Name of Employer    C	WASHINGTON DEMOCRATIC PARTY Mailing Address PO Box 4027	State Zip Code	10 04 2010
Primary General Other (specify) ▼    12000.00	FEC ID number of contributing federal political committee.	C	1
Strickland for Governor  Mailing Address 65 E State Street, Suite 1800  City State Zip Code Columbus OH 43215  FEC ID number of contributing federal political committee.  Name of Employer  Receipt Transaction ID: SA15-1471  Amount of Each Receipt this Period  20000.00  Receipt Transaction ID: SA15-1471  Amount of Each Receipt this Period  20000.00	Primary General		00
City Columbus OH 43215  FEC ID number of contributing federal political committee.  Name of Employer  Primary Other (specify) ▼  City Columbus OH 43215  Amount of Each Receipt this Period  Coccupation  Aggregate Year-to-Date  Aggregate Year-to-Date  62276.71  Transaction ID: SA15-1471  Amount of Each Receipt this Period  20000.00	Strickland for Governor	e 1800	M M / D D / Y Y Y Y
Name of Employer    Occupation	Columbus  FEC ID number of contributing	OH 43215	Transaction ID: SA15-1471 Amount of Each Receipt this Period
Primary General Other (specify)   General 62276.71	Name of Employer	Occupation	
SUBTOTAL of Receipts This Page (optional).	Primary General		71
ge (option)	SUBTOTAL of Receipts This Page (optional)		44000.00

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/32 (check only one)  11a 11b 11c 12 13 14 X 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pe the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) House Senate Victory Fund Mailing Address 120 Maryland Avenu City Washington	ue, NE State Zip Code DC 20002	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	16419.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 16419.00	
Full Name (Last, First, Middle Initial) People for Patty Murray  Mailing Address PO Box 3662		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: SA15-1476
Seattle	WA 98124	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	21000.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 21000.00	
Full Name (Last, First, Middle Initial)		2. (2
Carney for Congress  Mailing Address PO Box A		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: SA15-1477
Clarks Summit  FEC ID number of contributing federal political committee.	PA 18411	Amount of Each Receipt this Period  15000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 15000.00	
SUBTOTAL of Receipts This Page (optional	)	52419.00

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule( for each category of the Detailed Summary Page	(crieck offly offe)
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any he name and address of any political committee.  TEE - TRAVEL OFFSET ACCOUNT	person for the purpose of soliciting contributions tree to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MINNESOTA DEMOCRATIC FARM LABOR F  Mailing Address 255 EAST PLATO B	LVD.	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ST. PAUL	State Zip Code MN 55107	Transaction ID: SA15-1475  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	24000.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 24000.0	
Full Name (Last, First, Middle Initial) Quinn-Simon for Illinois Mailing Address 676 N LaSalle Drive, Suite 340		Date of Receipt
City	State Zip Code	10 07 2010
<u>Chicago</u>	IL 60654	Transaction ID: SA15-1478  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	16800.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 16800.0	0
Full Name (Last, First, Middle Initial)	_ I	Date of Bassist
Connecticut Victory 2010  Mailing Address PO Box 1174		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: SA15-1481
Springfield  FEC ID number of contributing federal political committee.	VA 22151	Amount of Each Receipt this Period  32078.12
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 32078.1	2
SUBTOTAL of Receipts This Page (optional)		72878.12

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 32 (check only one)  11a 11b 11c 12  13 14 X 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE		on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Cmte to Elect Diane Denish Inc.  Mailing Address PO Box 93656  City Albuquerque FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code NM 87199  C  Occupation  Aggregate Year-to-Date ▼  24200.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Boswell for Congress Mailing Address 224 S. State Street  City Lamoni  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General	State Zip Code IA 50140  C  Occupation  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) PENNSYLVANIA DEMOCRATIC PARTY Mailing Address 300 NORTH 2ND STR  City HARRISBURG FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:	State Zip Code PA 17101  C Occupation	Date of Receipt  M M M / D D / Y Y Y Y Y  1 0 1 3 2 0 1 0  Transaction ID: SA15-1482  Amount of Each Receipt this Period  2900.00
Primary General Other (specify)  SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number		45400.00

В.

C.

SCHEDULE B (FEC Form 3X)		F05 : :::=	NUMBER TO SECOND
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	lule(s) FOR LINE NUMI (check only one)	
II EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Sally Armbruster			Transaction ID: SB21B-1301 Date of Disbursement
Mailing Address 2208 N. Sedgwick, Floor	2		$\begin{bmatrix} \begin{smallmatrix} M & 0 & M \\ 1 & 0 & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 0 & 0 \\ 0 & 4 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & 1 & 0 \\ 2 & 0 & 1 & 0 \end{bmatrix} $
,	State Zip Code IL 60614		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Budget Rent-A-Car Acct#BU10380-73-000	-1		Transaction ID: SB21B-1302 Date of Disbursement
Mailing Address 14297 Collections Center	Drive		$\begin{bmatrix} 1 & 0 & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
•	State Zip Code IL 60693		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		• •	125.47
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) DAVID GREELISH			Transaction ID: SB21B-1303 Date of Disbursement
Mailing Address 69 Galen Street, #5			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ O & A \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & O \end{smallmatrix} \end{bmatrix} $
	State Zip Code MA 02472		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			132.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			1057.47

В.

C.

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

FOR LINE NUMBER: PAGE 11/32 Use separate schedule(s) (check only one) for each category of the 21b 22 23 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1304 Kerry McNellis Date of Disbursement 0 4 1<sup>™</sup>0 2010 Mailing Address 6 Dover Court City State Zip Code Amount of Each Disbursement this Period San Carlos 94070 CA 66.74 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1305 Kerry McNellis Date of Disbursement <sup>™</sup>0 0 4 2010 Mailing Address 6 Dover Court City State Zip Code Amount of Each Disbursement this Period San Carlos 94070 CA 330.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1306 Catherine Pallenik Date of Disbursement 0 4 2010 Mailing Address 10401 Grosvenor Place, Apt 420 City State Zip Code Amount of Each Disbursement this Period North Bethesda MD 20852 195.00 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 591.74 SUBTOTAL of Disbursements This Page (optional) ...  $\triangleright$ 

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

 $\blacktriangleright$ 

C.

age# 10931696515					
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	NE NUMBER: PAGE 12/32		
TEMIZED DISBURSEMENTS	for each category of the	(Crieck ori	<u> </u>		
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b	
Any Information copied from such Reports and Statement or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)	and address of any political	Committee to so	DICIT CONTINUUTIONS IN	om such committee	
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT			
Full Name (Last, First, Middle Initial)				: SB21B-1307	
Catherine Pallenik			Date of Disburs		
Mailing Address 10401 Grosvenor Place, A	Apt 420			) Å	
•	State Zip Code MD 20852		Amount of Each	Disbursement this Period	
Purpose of Disbursement			L	280.00	
Travel & Subsistence Expense Reimb  Candidate Name		Category/			
		Туре			
Office Sought: House Disburser Senate	ment For:  Primary General				
President	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: Date of Disburs	: SB21B-1308 ement	
Moiling Address 40404 Our room Plane	A-+ 400		M M / D	0 4 Y Y Y Y Y Y Y Y Y	
Mailing Address 10401 Grosvenor Place, A	4pt 420			2010	
•	State Zip Code MD 20852		Amount of Each	Disbursement this Period	
Purpose of Disbursement	20002			210.90	
Travel Expense Candidate Name		Category/			
Candidate Name		Type			
Office Sought: House Disburser Senate	ment For: Primary General				
	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: Date of Disburs	: SB21B-1309	
	A		M M / D	0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 10401 Grosvenor Place, A	Apt 420		10	2010	
•	State Zip Code MD 20852		Amount of Each	Disbursement this Period	
Purpose of Disbursement				330.00	
Travel & Subsistence Expense Reimb  Candidate Name		Cotogony			
Candidate Name		Category/ Type			
Office Sought: House Disburser					
	Primary General Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)				820.90	

SUBTOTAL of Disbursements This Page (optional)

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

C.

COLLEDIN E B /EEO Farm 2V)				
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		PAGE 13 / 32
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem		by any person for	or the purpose of soliciti	ng contributions
or for commercial purposes, other than using the name	e and address of any political	committee to sol	icit contributions from s	uch committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SI Date of Disbursemen	
Mailing Address 10401 Grosvenor Place,	Apt 420		10  0 4	Y 2010
,	State Zip Code MD 20852		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel Expense				253.36
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
Catherine Pallenik			Transaction ID: SI Date of Disbursemen	-
Mailing Address 10401 Grosvenor Place,	Apt 420		10  0 4	Y 2010
,	State Zip Code MD 20852		Amount of Each Disk	oursement this Period
Purpose of Disbursement		-		396.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
Catherine Pallenik			Transaction ID: SI Date of Disbursemen	nt
Mailing Address 10401 Grosvenor Place,	Apt 420		10  0 4	2010
	State Zip Code MD 20852		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel Expense				47.11
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	- 71-9		
State: District:	· · · · · · · · · · · · · · · · · · ·			
SUBTOTAL of Disbursements This Page (optional) .				696.47

C.

age# 10951090517			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-1313 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 0 \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City North Bethesda	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Category/ Type	252.00
State: District:			
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-1314 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City North Bethesda	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			10.61
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1315
Catherine Pallenik			Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & A \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & O \end{smallmatrix} \end{bmatrix} $
City North Bethesda	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			390.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)	. ,,,,	
State: District:	- (-1- ce)/ <b>4</b>		
SUBTOTAL of Disbursements This Page (optional)			653.11

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	IE NUMBER: PAGE 15/32	
ITEMIZED DISBURSEMENTS		X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) PAUL STOVALL			Transaction ID: SB21B-1316 Date of Disbursement	
Mailing Address 257A Brooklyn Avenue			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{smallmatrix} \end{bmatrix}$	
	State Zip Code NY 11213		Amount of Each Disbursement this Period	
Purpose of Disbursement Travel Expense			40.34	
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) PAUL STOVALL			Transaction ID: SB21B-1317 Date of Disbursement	
Mailing Address 257A Brooklyn Avenue			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{smallmatrix} \end{bmatrix}$	
•	State Zip Code NY 11213		Amount of Each Disbursement this Period	
Purpose of Disbursement			50.00	
Airline Baggage Fees Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. 100		
State: District:				
Full Name (Last, First, Middle Initial) PAUL STOVALL			Transaction ID: SB21B-1318 Date of Disbursement	
Mailing Address 257A Brooklyn Avenue			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$	
	State Zip Code NY 11213		Amount of Each Disbursement this Period	
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00	
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:	· 			
SURTOTAL of Dishureaments This Page (ontional)			890.34	

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age# 10931090319			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only X 21b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-1319 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & A \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{smallmatrix} \end{bmatrix} $
	State Zip Code DC 20502		Amount of Each Disbursement this Period
	ment For:	Category/ Type	8013.40
Senate President State: District:	Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-1320 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		10 10 10 10 10 10 10 10 10 10 10 10 10 1
City Washington	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift Helo			5476.70
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1321
WHITE HOUSE AIRLIFT OPERATIONS			Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & A \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & O \end{smallmatrix} \end{bmatrix} $
City Washington	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift In-flight Services			33.28
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			13523.38

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

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ago,, 10001000020			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	one) ☐ 22
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: SB21B-1322 Date of Disbursement
Mailing Address 2250 Clarendon Blvd., Ap	ot 107		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} V & Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
,	State Zip Code VA 22201		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			47.53
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	,	
State: District:			
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: SB21B-1323 Date of Disbursement
Mailing Address 2250 Clarendon Blvd., Ap	ot 107		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & O \end{smallmatrix} \end{bmatrix} $
,	State Zip Code VA 22201		Amount of Each Disbursement this Period
Purpose of Disbursement			187.94
Travel & Subsistence Expense Reimb Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Budget Rent-A-Car Acct#BU10380-73-000	-1		Transaction ID: SB21B-1324 Date of Disbursement
Mailing Address 14297 Collections Center	Drive		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & O \end{smallmatrix} \end{bmatrix} $
	State Zip Code IL 60693		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			1060.14
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	- (-p // <b>V</b>		
SUBTOTAL of Disbursements This Page (optional) .		<u>►</u>	1295.61

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

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SCHEDULE B (FEC Form 3X)		FOR LINE	E NUMBER: PAGE 18/32		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)		
	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	TNUC			
/					
Full Name (Last, First, Middle Initial) Alex D'UII			Transaction ID: S Date of Disburseme	ent	
Mailing Address 1570 Kingswood Drive			10 7 0 5	Y ŽOIO	
•	State Zip Code CA 94010		Amount of Each Dis	sbursement this Period	
Purpose of Disbursement Travel Expense				4.41	
Candidate Name		Category/ Type			
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) Alex D'UII			Transaction ID: S Date of Disburseme	ent	
Mailing Address 1570 Kingswood Drive			10 7 0 5	2010	
•	State Zip Code CA 94010		Amount of Each Dis	sbursement this Period	
Purpose of Disbursement Airline Baggage Fees				25.48	
Candidate Name		Category/ Type			
Senate President	ment For: Primary General Other (specify)				
State: District: Full Name (Last, First, Middle Initial)					
Alex D'Ull			Transaction ID: S Date of Disburseme	ent	
Mailing Address 1570 Kingswood Drive			10 0 5	Y ŽOŽOŠ	
	State Zip Code CA 94010		Amount of Each Dis	sbursement this Period	
Purpose of Disbursement Travel & Subsistence Expense Reimb				185.96	
Candidate Name		Category/ Type			
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	, ypc			
State: District:	Other (Specify)				
SUBTOTAL of Disbursements This Page (optional) .		······		215.85	

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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE	
		X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	TNUC	
Full Name (Last, First, Middle Initial) Stephanie Gauzens			Transaction ID: SB21B-1328 Date of Disbursement
Mailing Address 1271 Royal Oak Drive			10 10 5 / 2010
	State Zip Code FL 34698		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			15.79
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Stephanie Gauzens			Transaction ID: SB21B-1329 Date of Disbursement
Mailing Address 1271 Royal Oak Drive			$\begin{bmatrix} M & M & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 5 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
,	State Zip Code FL 34698		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			157.41
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) DAVID GIFFORD			Transaction ID: SB21B-1330 Date of Disbursement
Mailing Address 4082 Happy Valley Road			$\begin{bmatrix} M & M & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 5 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code CA 94549		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			53.30
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	(open_j) \		
SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	226.50

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

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age# 10931090323			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only o	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		y any person for	the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) DAVID GREELISH			Transaction ID: SB21B-1331 Date of Disbursement
Mailing Address 69 Galen Street, #5			10 M / D D / Y Y Y Y Y Y
City Watertown	State Zip Code MA 02472		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	60.50
Candidate Name	١.	Category/ Type	
Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify)	71-1	
Full Name (Last, First, Middle Initial)			Transaction ID. CD01D 1000
DAVID GREELISH			Transaction ID: SB21B-1332 Date of Disbursement
Mailing Address 69 Galen Street, #5			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&0&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\0&5\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$
City Watertown	State Zip Code MA 02472		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	1	•	199.65
Candidate Name	L.	Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Nicole Lynch			Transaction ID: SB21B-1333 Date of Disbursement
Mailing Address 7830 Cedar Lane			10 M / D D / Y Y Y Y Y Y
City Elkins Park	State Zip Code PA 19027		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	35.75
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:    Primary   General     Other (specify)   \(\Phi\)	1,100	
State: District:	· · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)		<b>•</b>	295.90

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age# 10931090324			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only X) 21b 27	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		y any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) Nicole Lynch			Transaction ID: SB21B-1334 Date of Disbursement
Mailing Address 7830 Cedar Lane			$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} D & D \\ 0 & 5 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Elkins Park	State Zip Code PA 19027		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Disburs Senate	ement For: Primary General	Category/ Type	199.65
President State: District:	Other (specify)		
Full Name (Last, First, Middle Initial) Nicole Lynch			Transaction ID: SB21B-1335 Date of Disbursement
Mailing Address 7830 Cedar Lane			10 0 10 10 10 10 10 10 10 10 10 10 10 10
City Elkins Park	State Zip Code PA 19027		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			17.15
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1336
Nicole Lynch			Date of Disbursement
Mailing Address 7830 Cedar Lane			$\begin{bmatrix} 1 & 0 & M & M & M & M & M & M & M & M & M$
City Elkins Park	State Zip Code PA 19027		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		-	177.87
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	. ) [-	
State: District:	(-1- <del></del> )/ ¥		
SUBTOTAL of Disbursements This Page (optional)			394.67

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

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SCHEDULE B (FEC Form 3X)		FORLINE	ALL IMPED	DAOE 00 / 00
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only		
TI EMIZED DIODOTTOLINETTO	Detailed Summary Page	X 21b 27		24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
/				
Full Name (Last, First, Middle Initial) GREG MAYS			Transaction ID: SI Date of Disbursemen	t
Mailing Address PO BOX 25153			10 0 5	Y 2010 Y
City WASHINGTON	State Zip Code DC 20007		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel Expense				64.46
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) GREG MAYS			Transaction ID: SI Date of Disbursemen	t
Mailing Address PO BOX 25153			10 0 5	Y ŽOŤOŤ
City WASHINGTON	State Zip Code DC 20007		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				187.93
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) GREG MAYS			Transaction ID: SI Date of Disbursemen	t
Mailing Address PO BOX 25153			10  0 5	<sup>2</sup> 2010
City WASHINGTON	State Zip Code DC 20007		Amount of Each Disk	oursement this Period
Purpose of Disbursement Car Rental				152.14
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
SURTOTAL of Dishursements This Page (ontional)				404.53

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 23 / 32
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Crieck only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	o and address of any pointed		ion communications from each committee
DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) JESSE J ROSEN			Transaction ID: SB21B-1340 Date of Disbursement
Mailing Address 1045 W. County Line Ro	ad		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & D \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & O \end{smallmatrix} \end{bmatrix}$
City Bayside	State Zip Code WI 53217		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			19.88
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) JESSE J ROSEN			Transaction ID: SB21B-1341 Date of Disbursement
Mailing Address 1045 W. County Line Ro	ad		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & D \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & I & O \end{bmatrix} $
City Bayside	State Zip Code WI 53217		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			36.40
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) GLEN RYNIEWSKI			Transaction ID: SB21B-1342 Date of Disbursement
Mailing Address 6104 W. HENDERSON			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City CHICAGO	State Zip Code IL 60634		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			43.61
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:	· 		
SUBTOTAL of Disbursements This Page (optional)			99.89

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

FOR LINE NUMBER: PAGE 24/32 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1343 ROBERT SCHMUCK Date of Disbursement 05 1<sup>™</sup>0 2010 Mailing Address 1118 5th Street, NW City State Zip Code Amount of Each Disbursement this Period Washington DC 20001 3.13 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1344 ROBERT SCHMUCK Date of Disbursement <sup>™</sup>0 05 2010 Mailing Address 1118 5th Street, NW City State Zip Code Amount of Each Disbursement this Period Washington 20001 DC 8.40 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1345 ROBERT SCHMUCK Date of Disbursement 05 2010 Mailing Address 1118 5th Street, NW City State Zip Code Amount of Each Disbursement this Period Washington DC 20001 20.81 Purpose of Disbursement Car Rental Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 32.34 SUBTOTAL of Disbursements This Page (optional) ...  $\triangleright$ 

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

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SCHEDULE B (FEC Form 3X)		LEODUNE	AUUMDED DAGE OF (OC	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE I (check only		
ITEMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	DUNT		
Full Name (Last, First, Middle Initial) ALESCIA TEEL			Transaction ID: SB21B-1346 Date of Disbursement	
Mailing Address 63 CORYELL STREET, A	APT. D		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 0 & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{smallmatrix} \end{bmatrix} $	
•	State Zip Code NJ 08530		Amount of Each Disbursement this Period	
Purpose of Disbursement Travel Expense			28.62	
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) ALESCIA TEEL			Transaction ID: SB21B-1347 Date of Disbursement	
Mailing Address 63 CORYELL STREET, A	APT. D		$\begin{bmatrix} 1 & 0 & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 5 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix}$	
•	State Zip Code NJ 08530		Amount of Each Disbursement this Period	
Purpose of Disbursement Airline Baggage Fees			26.50	
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) ALESCIA TEEL			Transaction ID: SB21B-1348 Date of Disbursement	
Mailing Address 63 CORYELL STREET, A	APT. D		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$	
	State Zip Code NJ 08530		Amount of Each Disbursement this Period	
Purpose of Disbursement Travel & Subsistence Expense Reimb			122.43	
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:	·			
SUBTOTAL of Disbursements This Page (optional)			177.55	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		PAGE 26/32
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 23 2	24 25 26
A Life and the second Objects		27		28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial)			Transaction ID: S	B21B-1349
ALESCIA TEEL			Date of Disbursemer	nt
Mailing Address 63 CORYELL STREET, A	APT. D		10 0 5	2010
	State Zip Code NJ 08530		Amount of Each Disk	oursement this Period
Purpose of Disbursement		v v		70.83
Travel Expense Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)	.,		
State: District:  Full Name (Last, First, Middle Initial)				
ALESCIA TEEL			Transaction ID: SI Date of Disbursemer	
Mailing Address 63 CORYELL STREET, A	APT. D		10 / 05	2010 <sup>Y</sup>
,	State Zip Code		Amount of Each Disk	oursement this Period
LAMBERTVILLE Purpose of Disbursement	NJ 08530			187.93
Travel & Subsistence Expense Reimb				
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:  Full Name (Last, First, Middle Initial)				
DEPARTMENT OF TREASURY			Transaction ID: SI Date of Disbursemen	
Mailing Address P.O. BOX 27800			10 0 5	2010
	State Zip Code DC 20038-7800		Amount of Each Disk	oursement this Period
Purpose of Disbursement Airfare		•		972.68
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре		
State: District:	· · · · ·			
SUBTOTAL of Disbursements This Page (optional)				1231.44

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

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

FOR LINE NUMBER: PAGE 27/32 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1352 DEPARTMENT OF TREASURY Date of Disbursement 05 1<sup>™</sup>0 2010 Mailing Address P.O. BOX 27800 Citv State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 84.00 Purpose of Disbursement Train Travel Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1353 DEPARTMENT OF TREASURY Date of Disbursement 05 1<sup>™</sup>0 2010 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON 20038-7800 DC 107.80 Purpose of Disbursement Lodging & Catering Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1354 DEPARTMENT OF TREASURY Date of Disbursement 05 2010 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 130.40 Purpose of Disbursement Airfare Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 322.20 SUBTOTAL of Disbursements This Page (optional) ...

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

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SCHEDULE B (FEC Form 3X)	Harris and a short take	FOR LINE	NUMBER:	PAGE 28/32
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	TNUC		
Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY			Transaction ID: S Date of Disbursemer	
Mailing Address P.O. BOX 27800			10 0 5	<sup>'</sup> 2010 <sup>'</sup>
City WASHINGTON	State Zip Code DC 20038-7800		Amount of Each Dist	oursement this Period
Purpose of Disbursement Airfare				1291.80
Candidate Name		Category/ Type		
Senate President	ement For:  Primary General  Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: S	D01D 1056
DEPARTMENT OF TREASURY			Date of Disbursemen	
Mailing Address P.O. BOX 27800			10  0 5	<sup>Y</sup> 2010 <sup>Y</sup>
City WASHINGTON	State Zip Code DC 20038-7800		Amount of Each Disk	oursement this Period
Purpose of Disbursement Airfare		· · · ·		903.26
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
DEPARTMENT OF TREASURY			Transaction ID: S Date of Disbursemen	
Mailing Address P.O. BOX 27800			10 0 5	2010
City WASHINGTON	State Zip Code DC 20038-7800		Amount of Each Disk	oursement this Period
Purpose of Disbursement Airfare		· · ·		438.97
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify)	NL -		
State: District:				
SUBTOTAL of Disbursements This Page (optional)				2634.03

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY			Transaction ID: SB21B-1358 Date of Disbursement
Mailing Address P.O. BOX 27800			10 10 5 / 2010
,	State Zip Code DC 20038-7800		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			20.87
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1359
DEPARTMENT OF TREASURY			Date of Disbursement
Mailing Address P.O. BOX 27800			$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} D & D \\ 0 & 5 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
,	State Zip Code DC 20038-7800		Amount of Each Disbursement this Period
Purpose of Disbursement Airfare			241.95
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Turner Mari ID CD04D 4000
DEPARTMENT OF TREASURY			Transaction ID: SB21B-1360 Date of Disbursement
Mailing Address P.O. BOX 27800			1 0 M / D D / Y 2 0 1 0 Y
	State         Zip Code           DC         20038-7800		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		0 0	9.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Турс	
State: District:	Onici (specify)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	272.32

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

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## **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 30/32 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1361 DEPARTMENT OF TREASURY Date of Disbursement 05 1<sup>™</sup>0 2010 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 130.82 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1362 DEPARTMENT OF TREASURY Date of Disbursement 05 1<sup>™</sup>0 2010 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON 20038-7800 DC 16.07 Purpose of Disbursement Airfare Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1363 DEPARTMENT OF TREASURY Date of Disbursement 05 2010 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 864.00 Purpose of Disbursement Airfare Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 1010.89

SUBTOTAL of Disbursements This Page (optional) ...

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only o		
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		by any person for	the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCO	UNT		
Full Name (Last, First, Middle Initial) AMERICAN EXPRESS			Transaction ID: SB21B-1469 Date of Disbursement	
Mailing Address P O BOX 1270			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$	
City NEWARK	State Zip Code NJ 07101		Amount of Each Disbursement this Period	
Purpose of Disbursement Car Rental		-	7271.97	
Candidate Name	,	Category/ Type		
Office Sought:  Senate President  State:  Disburse	ement For: Primary General Other (specify)		See Attached Memo Entry	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1469-10000	
Avis Rent-A-Car  Mailing Address 220 West 31st Street			Date of Disbursement    Mo M	
City New York	State Zip Code NY 10001		Amount of Each Disbursement this Period	
Purpose of Disbursement Car Rental			1798.60	
Candidate Name		Category/ Type	[MEMO ITEM]	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		Memo Entry	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1469-20000	
Avis Rent-A-Car			Date of Disbursement	
Mailing Address Dallas-Fort Worth Airpor 2424 East 38th Street	t		10 M / D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Dallas	State Zip Code TX 75261		Amount of Each Disbursement this Period	
Purpose of Disbursement Car Rental		•	2368.26	
Candidate Name		Category/ Type	IMENA ITEM	
Office Sought: House Disburse Senate President	ement For:    Primary   General     Other (specify)   \(\bigvert		[MEMO ITEM] Memo Entry	
State: District:				
SUBTOTAL of Disbursements This Page (optional)		<u></u>	7271.97	

В.

Office Sought:

State:

House

Senate

District:

President

Disbursement For:

Primary

Other (specify)

## **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 32/32 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b 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) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1469-30000 AVIS-RENT-A-CAR Date of Disbursement 1 2 2010 Mailing Address 9217 AIRPORT BLVD City State Zip Code Amount of Each Disbursement this Period LOS ANGELES CA 90045 3105.11 Purpose of Disbursement Car Rental Candidate Name Category/ Type [MEMO ITEM] Office Sought: Disbursement For: House Memo Entry General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1470 AMERICAN EXPRESS Date of Disbursement <sup>™</sup>0 2010 Mailing Address P O BOX 1270 City State Zip Code Amount of Each Disbursement this Period NÉWARK 07101 NJ 200000.00 Purpose of Disbursement Prepaid Expenses Candidate Name Category/ Type

General

SUBTOTAL of Disbursements This Page (optional)	•	200000.00
TOTAL This Period (last page this line number only)	•	234119.10

Advance payment of travel

expenses