

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Swing the Vote

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		794.97
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	605.37									
(c) Total Receipts (from Line 19)	1960.25	6190.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2565.62	6985.31								
7. Total Disbursements (from Line 31)	2293.33	6713.02								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	272.29	272.29								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Swing the Vote

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	1841.00	4837.73
(i) Itemized (use Schedule A)		
(ii) Unitemized	119.25	1352.61
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1960.25	6190.34
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1960.25	6190.34
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1960.25	6190.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1960.25	6190.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	381.14	1654.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	381.14	1654.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	1912.19	5058.44
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2293.33	6713.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2293.33	6713.02

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	1960.25	6190.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1960.25	6190.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	381.14	1654.58
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	381.14	1654.58

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Swing the Vote

A. Full Name (Last, First, Middle Initial)
Donors Anonymous

Mailing Address No Address

City State Zip Code
None NH

FEC ID number of contributing federal political committee. C

Name of Employer none Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 508.97

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.5748

Amount of Each Receipt this Period 41.00

small cash donations at table

B. Full Name (Last, First, Middle Initial)
Maureen Blasco

Mailing Address 67 Norcross Rd

City State Zip Code
Royalston MA 01368

FEC ID number of contributing federal political committee. C

Name of Employer Winchendon MA Public School Sy Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.5751

Amount of Each Receipt this Period 500.00

check donation

C. Full Name (Last, First, Middle Initial)
T. Stephen Jones

Mailing Address 123 Black Birch Trail

City State Zip Code
Florence MA 01062

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.5740

Amount of Each Receipt this Period 300.00

check donation

SUBTOTAL of Receipts This Page (optional) 841.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 15
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Swing the Vote

A.

Full Name (Last, First, Middle Initial) Thomas F. Plaut		Date of Receipt
Mailing Address 125 Red Gate Lane		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
City	State	Zip Code
Amherst	MA	01002
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.5743
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer Self	Occupation Physician	check donation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

B.

Full Name (Last, First, Middle Initial) Margarita Shannon		Date of Receipt
Mailing Address 119 Mill Lane		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
City	State	Zip Code
Amherst	MA	01002
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.5754
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer Greenfield Community College	Occupation Teacher	check donation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1841.00"/>

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Swing the Vote

A.

Full Name (Last, First, Middle Initial)
Leah Anne Brown

Transaction ID: SB21B.5773
Date of Disbursement

Mailing Address 16 Cedar St.

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

City Roxbury State MA Zip Code 02119

Amount of Each Disbursement this Period

Purpose of Disbursement
reimb phone bills paid 5/7/08

001
Category/ Type

462.20

Candidate Name
JOHN S MCCAIN

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

State: District:

B.

Full Name (Last, First, Middle Initial)
CAM Audio

Transaction ID: SB21B.5778
Date of Disbursement

Mailing Address 2210 Executive Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	8

City Garland State TX Zip Code 75041

Amount of Each Disbursement this Period

Purpose of Disbursement
Blank DVD's - see Phillips reimb.

006
Category/ Type

37.82

Candidate Name
JOHN S MCCAIN

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

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
EF Lane Hotel

Transaction ID: SB21B.5791
Date of Disbursement

Mailing Address 30 Main St

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

City Keene State NH Zip Code 03431

Amount of Each Disbursement this Period

Purpose of Disbursement
room rent for party-see Perkins reimb.

007
Category/ Type

200.00

Candidate Name
JOHN S MCCAIN

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

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

462.20

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 NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Swing the Vote

A.	Full Name (Last, First, Middle Initial) Home Depot	Transaction ID: SB21B.5797 Date of Disbursement 10 / 10 / 2008
	Mailing Address	Amount of Each Disbursement this Period 9.50
	City: Chicopee State: MA Zip Code	
	Purpose of Disbursement: banner hdw - see Per4kins reimb.	007 Category/Type
	Candidate Name: JOHN S MCCAIN	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
	State: District:	

B.	Full Name (Last, First, Middle Initial) NEATO	Transaction ID: SB21B.5780 Date of Disbursement 09 / 16 / 2008
	Mailing Address: 250Dodge Ave.	Amount of Each Disbursement this Period 19.19
	City: East Haven State: CT Zip Code: 06512	
	Purpose of Disbursement: DVD labels-see Phillips reimb.	006 Category/Type
	Candidate Name: JOHN S MCCAIN	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
	State: District:	

C.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5790 Date of Disbursement 10 / 28 / 2008
	Mailing Address: 93 Pinedale Rd	Amount of Each Disbursement this Period 200.00
	City: Athol State: MA Zip Code: 01331	
	Purpose of Disbursement: reimb for room rent for party	007 Category/Type
	Candidate Name: JOHN S MCCAIN	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" 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)	200.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Swing the Vote

A.	Full Name (Last, First, Middle Initial) Rutilious B. Perkins	Transaction ID: SB21B.5792 Date of Disbursement 10 / 28 / 2008
	Mailing Address 93 Pinedale Rd	Amount of Each Disbursement this Period 9.50
	City Athol State MA Zip Code 01331	
	Purpose of Disbursement reimb. banner hardware	007 Category/Type
	Candidate Name JOHN S MCCAIN	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" 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) Staples	Transaction ID: SB21B.5777 Date of Disbursement 09 / 13 / 2008
	Mailing Address 63 Key Rd	Amount of Each Disbursement this Period 13.49
	City Keene State NH Zip Code 03431	
	Purpose of Disbursement disc storage - see Phillips reimb	006 Category/Type
	Candidate Name JOHN S MCCAIN	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.5757 Date of Disbursement 10 / 11 / 2008
	Mailing Address 63 Key Rd	Amount of Each Disbursement this Period 2.98
	City Keene State NH Zip Code 03431	
	Purpose of Disbursement in-kind donation - see phillips	006 Category/Type
	Candidate Name JOHN S MCCAIN	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	9.50
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Swing the Vote

A. Full Name (Last, First, Middle Initial)
US Postal Service - Winchester

Mailing Address

City Winchester State NH Zip Code 03570

Purpose of Disbursement
postage-see Phillips in-kind

Candidate Name
JOHN S MCCAIN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5766
Date of Disbursement

10 / 02 / 2008

Amount of Each Disbursement this Period

24.94

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
US Postal Service - Winchester

Mailing Address

City Winchester State NH Zip Code 03570

Purpose of Disbursement
postage-see Phillips in-kind don.

Candidate Name
JOHN S MCCAIN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5763
Date of Disbursement

10 / 15 / 2008

Amount of Each Disbursement this Period

3.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 1

City Worcester State MA Zip Code 01654-0001

Purpose of Disbursement
Portion of Brown 5/7 in-kind to be reimb

Candidate Name
JOHN S MCCAIN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5772
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

-462.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 12 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Swing the Vote

A. Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address P.O. Box 1 <hr/> City Worcester State MA Zip Code 01654-0001 <hr/> Purpose of Disbursement 5/7 pmt reimbto L.Brown Candidate Name JOHN S MCCAIN <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" 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: SB21B.5774 Date of Disbursement 10 / 01 / 2008
	Amount of Each Disbursement this Period 462.20
	[MEMO ITEM]
	Category/Type 001
B. Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address P.O. Box 1 <hr/> City Worcester State MA Zip Code 01654-0001 <hr/> Purpose of Disbursement toll-free phone service, voice mail Candidate Name JOHN S MCCAIN <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" 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: SB21B.5775 Date of Disbursement 10 / 20 / 2008
	Amount of Each Disbursement this Period 69.69
	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ►

69.69

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

741.39

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
EF Lane Hotel

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

Mailing Address
30 Main St

Amount
200.00

City State Zip Code
Keene NH 03431

Transaction ID: SE.5787

Purpose of Expenditure
room rent - see Perk-
ins Reimb

Category/
Type 007

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JOHN S MCCAIN

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3146.25

Disbursement For: Primary General
 Other (specify) : _____
2008
[MEMO ITEM]

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

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

Mailing Address
8-C Allstate Rd

Amount
482.19

City State Zip Code
Dorchester MA 02125

Transaction ID: SE.5783

Purpose of Expenditure
toner, paper to print
voter call lists

Category/
Type 007

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
JOHN S MCCAIN

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5058.44

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	482.19
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Leah Anne Brown
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote	FEC IDENTIFICATION NUMBER C C00401919
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Rutilious B. Perkins

Mailing Address
93 Pinedale Rd

City Athol	State MA	Zip Code 01331
---------------	-------------	-------------------

Purpose of Expenditure reimb. room rent for voter calling	Category/Type 007
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Name of Federal Candidate supported or Opposed by expenditure:
JOHN S MCCAIN

Calendar Year-To-Date Per Election for Office Sought	3346.25
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Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Amount
200.00

Transaction ID: SE.5786

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Rutilious B. Perkins

Mailing Address
93 Pinedale Rd

City Athol	State MA	Zip Code 01331
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Purpose of Expenditure reimb. for printing of lawn signs	Category/Type 007
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Name of Federal Candidate supported or Opposed by expenditure:
JOHN S MCCAIN

Calendar Year-To-Date Per Election for Office Sought	4576.25
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Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Amount
1230.00

Transaction ID: SE.5788

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	1430.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Leah Anne Brown
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Swing the Vote		FEC IDENTIFICATION NUMBER C C00401919	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Silver Direct, Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 290 Main St		Amount 1230.00	
City Marlborough		Transaction ID: SE.5789	
State NH		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Zip Code 03455		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Purpose of Expenditure lawn sign printing-s- ee Perkins reimb.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Category/ Type 007		[MEMO ITEM]	
Name of Federal Candidate supported or Opposed by expenditure: JOHN S MCCAIN			
Calendar Year-To-Date Per Election for Office Sought		3146.25	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1912.19
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Leah Anne Brown Signature	Date M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 8