

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MOVING AMERICA FORWARD

ADDRESS (number and street) Post Office Box 25
 Check if different than previously reported. (ACC)
Great Falls VA 22066

2. **FEC IDENTIFICATION NUMBER** C00375451
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2005 through 12 31 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Hubert C. Normile, Jr.

Signature of Treasurer Electronically Filed by Hubert C. Normile, Jr. Date 07 16 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
MOVING AMERICA FORWARD

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	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>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">13284.96</td></tr></table>	13284.96
Y	Y	Y	Y									
2	0	0	5									
13284.96												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">7542.15</td></tr></table>	7542.15										
7542.15												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">44000.00</td></tr></table>	44000.00	<table border="1" style="width: 100%;"><tr><td align="right">86762.09</td></tr></table>	86762.09								
44000.00												
86762.09												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">51542.15</td></tr></table>	51542.15	<table border="1" style="width: 100%;"><tr><td align="right">100047.05</td></tr></table>	100047.05								
51542.15												
100047.05												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">43085.70</td></tr></table>	43085.70	<table border="1" style="width: 100%;"><tr><td align="right">91590.60</td></tr></table>	91590.60								
43085.70												
91590.60												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">8456.45</td></tr></table>	8456.45	<table border="1" style="width: 100%;"><tr><td align="right">8456.45</td></tr></table>	8456.45								
8456.45												
8456.45												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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
MOVING AMERICA FORWARD

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	23500.00	36800.00
(i) Itemized (use Schedule A)	0.00	448.00
(ii) Unitemized	23500.00	37248.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	20500.00	49514.09
(c) Other Political Committees (such as PACs)	44000.00	86762.09
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	44000.00	86762.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	44000.00	86762.09

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.....	12285.70	13890.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	12285.70	13890.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30800.00	77700.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	43085.70	91590.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	43085.70	91590.60

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)	44000.00	86762.09
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	44000.00	86762.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12285.70	13890.60
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12285.70	13890.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
MOVING AMERICA FORWARD

A. Full Name (Last, First, Middle Initial) Madeleine Arison Mailing Address 9999 Collins Ave City State Zip Code Bal Harbour FL 33154 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2005 Transaction ID: SA11A1.4442 Amount of Each Receipt this Period 5000.00
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B. Full Name (Last, First, Middle Initial) Mickey Arison Mailing Address 9999 Collins Avenue City State Zip Code Bal Harbour FL 33154 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2005 Transaction ID: SA11A1.4439 Amount of Each Receipt this Period 3000.00
Name of Employer Occupation Carnival Cruise Line CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Robert Dickinson Mailing Address 29 Tahiti Beach Island Road City State Zip Code Coral Gables FL 33143 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2005 Transaction ID: SA11A1.4447 Amount of Each Receipt this Period 2500.00
Name of Employer Occupation Executive Carnival Cruise Lines Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	10500.00
TOTAL This Period (last page this line number only)	

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

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

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NAME OF COMMITTEE (In Full)
MOVING AMERICA FORWARD

A. Full Name (Last, First, Middle Initial)
Colleen Fain

Mailing Address 700 Arvida Parkway

City State Zip Code
Coral Gables FL 33156

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

Name of Employer n/a Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2005

Transaction ID: SA11A1.4451

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Richard Fain

Mailing Address 700 Arvida Parkway

City State Zip Code
Coral Gables FL 33156

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

Name of Employer Executive Occupation Royal Caribbean

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2005

Transaction ID: SA11A1.4449

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Howard Frank

Mailing Address 445 Grand Bay Drive

City State Zip Code
Key Biscayne FL 33149

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

Name of Employer Carnival Cruise Lines Occupation Vice Chair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 09 / 2005

Transaction ID: SA11A1.4440

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MOVING AMERICA FORWARD

A. Full Name (Last, First, Middle Initial)
Mary Frank

Mailing Address 445 Grand Bay Drive

City State Zip Code
Key Biscayne FL 33149

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2005

Transaction ID: SA11A1.4445

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Joel Jankowski

Mailing Address 1333 New Hampshire Ave NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation
Akin Gump Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2005

Transaction ID: SA11A1.4428

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Martin Margulies

Mailing Address 445 Grand Bay Drive, PH1

City State Zip Code
Key Biscayne FL 33149

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

Name of Employer Occupation
Self Employed Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2005

Transaction ID: SA11A1.4453

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	23500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 15
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" 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)
MOVING AMERICA FORWARD

Full Name (Last, First, Middle Initial) A. AKIN, GUMP, STRAUSS, HAUER & FELD LLP CIVIC ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 08 / 10 / 2005
Mailing Address 1333 NEW HAMPSHIRE AVE/NW STE 400		Transaction ID: SA11C.4435
City WASHINGTON	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C C00104901		Amount of Each Receipt this Period 4000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) B. INTERNATIONAL COUNCIL OF CRUISE LINES POLITICAL ACTION COMM (ICCL-PAC)		Date of Receipt M M / D D / Y Y Y Y Y 09 / 09 / 2005
Mailing Address 2111 Wilson Boulevard 8th Floor		Transaction ID: SA11C.4444
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C C00303073		Amount of Each Receipt this Period 4000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. NATIONAL THOROUGHbred RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC		Date of Receipt M M / D D / Y Y Y Y Y 11 / 14 / 2005
Mailing Address 2525 Harrodsburg Road		Transaction ID: SA11C.4458
City LEXINGTON	State KY	Zip Code 40504
FEC ID number of contributing federal political committee. C C00360008		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	13000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 15
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
MOVING AMERICA FORWARD

A. Full Name (Last, First, Middle Initial)
SWISHER INTERNATIONAL INC PAC FUND

Mailing Address **459 EAST 16TH STREET**

City **JACKSONVILLE** State **FL** Zip Code **32206**

FEC ID number of contributing federal political committee. **C C00312785**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	5

Transaction ID: SA11C.4437

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
WALT DISNEY PRODUCTIONS EMPLOYEES PAC (DISNEY EMPLOYEES POLITICAL ACTION COM

Mailing Address **1150 17TH STREET NW SUITE 400**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00197749**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4500.00**

Date of Receipt

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

Transaction ID: SA11C.4464

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	20500.00

**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)

PAGE 11 / 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)
MOVING AMERICA FORWARD

Full Name (Last, First, Middle Initial) A. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE		Transaction ID: SB21B.4474 Date of Disbursement
Mailing Address 120 MARYLAND AVENUE NE		<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2005"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement Rent (July - Aug.)	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="440.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE		Transaction ID: SB21B.4465 Date of Disbursement
Mailing Address 120 MARYLAND AVENUE NE		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2005"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement Rent (Sept. - Nov.)	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="660.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Ryan Grindler		Transaction ID: SB21B.4481 Date of Disbursement
Mailing Address 900 North Stuart Street #1201		<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2005"/>
City Arlington	State VA	Zip Code 22203
Purpose of Disbursement Consulting Fees	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="6185.70"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7285.70"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
MOVING AMERICA FORWARD

Full Name (Last, First, Middle Initial) A. Mr. Ryan Grindler		Transaction ID: SB21B.4482 Date of Disbursement 08 / 11 / 2005	
Mailing Address 900 North Stuart Street #1201		Amount of Each Disbursement this Period 5000.00	
City Arlington	State VA	Zip Code 22203	Category/ Type
Purpose of Disbursement Consulting Fees			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	12285.70

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 15

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

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NAME OF COMMITTEE (In Full)
MOVING AMERICA FORWARD

Full Name (Last, First, Middle Initial) A. Bob Casey for Pennsylvania Committee		Transaction ID: SB23.4540 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 5
Mailing Address PO Box 1177		Amount of Each Disbursement this Period 5000.00
City Harrisburg State PA Zip Code 17108	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
Category/Type		

Full Name (Last, First, Middle Initial) B. Florida Democratic Party - Federal Account		Transaction ID: SB23.4483 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 5
Mailing Address 214 South Bronough Street		Amount of Each Disbursement this Period 5000.00
City Tallahassee State FL Zip Code 32301	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
Category/Type		

Full Name (Last, First, Middle Initial) C. FRIENDS OF KENT CONRAD		Transaction ID: SB23.4471 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address PO BOX 812		Amount of Each Disbursement this Period 800.00
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ND District: 00		
Category/Type		

SUBTOTAL of Disbursements This Page (optional) ▶	10800.00
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 14 / 15

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

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NAME OF COMMITTEE (In Full)
MOVING AMERICA FORWARD

Full Name (Last, First, Middle Initial) A. NELSON 2006		Transaction ID: SB23.4466 Date of Disbursement 12 / 16 / 2005	
Mailing Address P O BOX 8666		Amount of Each Disbursement this Period 5000.00	
City OMAHA State NE Zip Code 68103	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. NELSON 2006		Transaction ID: SB23.4469 Date of Disbursement 12 / 16 / 2005	
Mailing Address P O BOX 8666		Amount of Each Disbursement this Period 5000.00	
City OMAHA State NE Zip Code 68103	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Pederson 2006		Transaction ID: SB23.4475 Date of Disbursement 09 / 20 / 2005	
Mailing Address PO BOX 34144		Amount of Each Disbursement this Period 5000.00	
City Phoenix State AZ Zip Code 85067	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 15

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

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NAME OF COMMITTEE (In Full)
MOVING AMERICA FORWARD

Full Name (Last, First, Middle Initial) A. Pederson 2006		Transaction ID: SB23.4478 Date of Disbursement 09 / 20 / 2005	
Mailing Address PO BOX 34144		Amount of Each Disbursement this Period 5000.00	
City Phoenix	State AZ	Zip Code 85067	Category/ Type
Purpose of Disbursement		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District:		

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	30800.00