

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
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

ADDRESS (number and street) PO Box 77492 -- Capitol Hill
 Check if different than previously reported. (ACC)
Washington DC 20013

2. **FEC IDENTIFICATION NUMBER** C00389882
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 01 01 2007 through 06 30 2007

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 Robert D. Kampia

Signature of Treasurer Electronically Filed by Robert D. Kampia Date 11 13 2007

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
 Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		26474.09
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	26474.09									
(c) Total Receipts (from Line 19)	51421.00	51421.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77895.09	77895.09								
7. Total Disbursements (from Line 31)	38350.00	38350.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39545.09	39545.09								
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

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	46100.00	46100.00
(i) Itemized (use Schedule A)	4321.00	4321.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	50421.00	50421.00
(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)	50421.00	50421.00
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	1000.00	1000.00
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))	51421.00	51421.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	51421.00	51421.00

DETAILED SUMMARY PAGE

of Disbursements

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38350.00	38350.00
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))..	38350.00	38350.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	38350.00	38350.00

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)	50421.00	50421.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50421.00	50421.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 / 20
	<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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A. Full Name (Last, First, Middle Initial)
Karen Field

Mailing Address 1377-C Spencer Ave.

City Lancaster State PA Zip Code 17603

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2007

Transaction ID: SA11A1.5608

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Robert E Field

Mailing Address 1377-C Spencer Ave

City Lancaster State PA Zip Code 17603

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

Name of Employer Occupation
The Manor Group Chair and VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2007

Transaction ID: SA11A1.5607

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
John Gilmore

Mailing Address P.O. Box 170608

City San Francisco State CA Zip Code 94117-0608

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

Name of Employer Occupation
Self Philanthropist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
04 / 02 / 2007

Transaction ID: SA11A1.5628

Amount of Each Receipt this Period
5000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial) A. David Glassco		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 2001 Travis Heights Blvd		Transaction ID: SA11A1.5629	
City State Zip Code Austin TX 78704-3640		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Musician			
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) B. Matthew Lennig		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7	
Mailing Address 152 Lois Lane		Transaction ID: SA11A1.5675	
City State Zip Code Palo Alto CA 94303-2904		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Research Occupation CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Daniel Lewis		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 4000 Ponce De Leon Blvd		Transaction ID: SA11A1.5676	
City State Zip Code Coral Gables FL 33146-1431		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer None Occupation Retired			
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) ▶	11000.00
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 / 20
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A. Full Name (Last, First, Middle Initial)
Jonathan Lewis

Mailing Address 4649 Ponce De Leon Blvd
ste 304

City coral gables State FL Zip Code 33146

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

Name of Employer Jonathan Lewis and Associates Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2007

Transaction ID: SA11A1.5678

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Michael Newman

Mailing Address 27141 Lerma

City Mission Viejo State CA Zip Code 92691

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

Name of Employer Self Employed Occupation Hearing Instrument Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 01 / 2007

Transaction ID: SA11A1.5733

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Michael Newman

Mailing Address 27141 Lerma

City Mission Viejo State CA Zip Code 92691

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

Name of Employer Self Employed Occupation Hearing Instrument Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 01 / 2007

Transaction ID: SA11A1.5734

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	▶	5100.00
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 9 / 20
	<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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A. Full Name (Last, First, Middle Initial)
Steven Persky

Mailing Address 361 21st St

City State Zip Code
Santa Monica CA 90402-2417

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

Name of Employer Dalton Investments Occupation Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.5756

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Rene Ruiz

Mailing Address 3 Chilcott Pl. #2

City State Zip Code
Jamaica Plain MA 02130

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

Name of Employer Intex Solutions, Inc. Occupation Financial Modeler

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.5775

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Ted A Semon

Mailing Address Eagle View Dr

City State Zip Code
Carol Stream IL 60188-1709

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 1 / 2 0 0 7

Transaction ID: SA11A1.5778

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	46100.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 20
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input checked="" 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)
 Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A. Full Name (Last, First, Middle Initial)
 ELLSWORTH FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 62

City State Zip Code
 Evansville IN 47701

FEC ID number of contributing federal political committee. **C** C00412346

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 0 1 / 2 0 0 7

Transaction ID: SA16.5891

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

**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 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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial)

A. ALAN MOLLOHAN FOR CONGRESS COMMITTEE

Mailing Address P. O. Box 1343

City Fairmont State WV Zip Code 26555

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: WV District: 01

Transaction ID: SB23.5933

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. AMERICA FORWARD LEADERSHIP PAC

Mailing Address 1831 BAY STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.5900

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BARNEY FRANK FOR CONGRESS COMMITTEE

Mailing Address P O BOX 260

City NEWTONVILLE State MA Zip Code 02460

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MA District: 04

Transaction ID: SB23.5922

Date of Disbursement

03 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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 / 20

<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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial) A. BEN CARDIN FOR SENATE		Transaction ID: SB23.5898 Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2007
Mailing Address P.O. BOX 21093		Amount of Each Disbursement this Period 1000.00
City CATONSVILLE	State MD	
Zip Code 21228		
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD	District: 03	

Full Name (Last, First, Middle Initial) B. BLUE DOG POLITICAL ACTION COMMITTEE		Transaction ID: SB23.5930 Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2007
Mailing Address 6849 Old Dominion Drive Suite 222		Amount of Each Disbursement this Period 1000.00
City McLean	State VA	
Zip Code 22101		
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. CIRO D. RODRIGUEZ FOR CONGRESS		Transaction ID: SB23.5916 Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2007
Mailing Address PO Box 14528		Amount of Each Disbursement this Period 1000.00
City San Antonio	State TX	
Zip Code 78214		
Purpose of Disbursement		
Candidate Name		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 23	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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 13 / 20

<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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial)

A. COMMITTEE FOR A PROGRESSIVE CONGRESS INC

Mailing Address 2201 WISCONSIN AVE NW SUITE 320

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement

Candidate Name

Category/
Type

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

State: District:

Transaction ID: SB23.5928

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT LINDA SANCHEZ

Mailing Address 601 S GLENOAKS BLVD SUITE 211

City BURBANK State CA Zip Code 91502

Purpose of Disbursement

Candidate Name

Category/
Type

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

State: CA District: 39

Transaction ID: SB23.5938

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. COURTNEY FOR CONGRESS

Mailing Address 38 RISLEY ROAD

City VERNON State CT Zip Code 06066

Purpose of Disbursement

Candidate Name

Category/
Type

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

State: CT District: 02

Transaction ID: SB23.5937

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial) A. COURTNEY FOR CONGRESS		Transaction ID: SB23.5914 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address 38 RISLEY ROAD		Amount of Each Disbursement this Period 1000.00
City VERNON State CT Zip Code 06066	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Transaction ID: SB23.5939 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 430 South Capitol Street SE 2nd Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. DUTCH RUPPERSBERGER FOR CONGRESS		Transaction ID: SB23.5931 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 22 West Padonia Road Suite C-141		Amount of Each Disbursement this Period 1000.00
City Timonium State MD Zip Code 21093	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
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 / 20

<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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial)

A. ELLSWORTH FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 62

City Evansville State IN Zip Code 47701

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IN District: 08

Transaction ID: SB23.5913

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF BARBARA BOXER

Mailing Address PO BOX 641751

City LOS ANGELES State CA Zip Code 90064

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 00

Transaction ID: SB23.5920

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CONGRESSMAN GEORGE MILLER

Mailing Address P.O. Box 5864

City Concord State CA Zip Code 94524

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 07

Transaction ID: SB23.5907

Date of Disbursement

03 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

2750.00

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 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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial) A. Friends of Farr		Transaction ID: SB23.5927 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 7
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 17	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. FRIENDS OF LOIS CAPP		Transaction ID: SB23.5896 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address PO Box 23940		Amount of Each Disbursement this Period 1000.00
City Santa Barbara State CA Zip Code 93121	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. FRIENDS OF MAURICE HINCHEY		Transaction ID: SB23.5893 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address PO Box 4497		Amount of Each Disbursement this Period 2000.00
City Kingston State NY Zip Code 12402	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 22	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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 17 / 20

<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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial)

A. HILLARY CLINTON FOR PRESIDENT EXPLORATORY COMMITTEE INC.

Mailing Address PO Box 77593

City Washington State DC Zip Code 20013

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
 Disbursement For: 2008 Primary General Other (specify) ▼
 State: District: 00

Transaction ID: SB23.5905

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. KILDEE FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 317

City Flint State MI Zip Code 48501

Purpose of Disbursement
Returned contribution

Candidate Name

Category/
Type

Office Sought: House Senate President
 Disbursement For: 2006 Primary General Other (specify) ▼
 State: MI District: 5

Transaction ID: SB23.5888

Date of Disbursement

02 / 25 / 2007

Amount of Each Disbursement this Period

-500.00

Full Name (Last, First, Middle Initial)

C. LOEBSACK FOR CONGRESS

Mailing Address PO Box 1457

City Iowa City State IA Zip Code 52244

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
 Disbursement For: 2008 Primary General Other (specify) ▼
 State: IA District: 02

Transaction ID: SB23.5923

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.5902

Date of Disbursement

06 / 13 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. PASTOR FOR ARIZONA

Mailing Address PO BOX 6554

City PHOENIX State AZ Zip Code 85005

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: AZ District: 04

Transaction ID: SB23.5895

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PRICE FOR CONGRESS COMMITTEE

Mailing Address P. O. Box 1986

City Raleigh State NC Zip Code 27602

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 4

Transaction ID: SB23.5935

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

7000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 19 / 20

<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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial)		Transaction ID: SB23.5909																					
A. STEM CELL ACTION FUND		Date of Disbursement																					
Mailing Address P.O. Box 40725		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	9		2	0	0	7														
City	State	Zip Code	Amount of Each Disbursement this Period																				
Denver	CO	80204	1000.00																				
Purpose of Disbursement		Category/Type																					
Candidate Name																							
Office Sought:	Disbursement For: 2008																						
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State: District:																							

Full Name (Last, First, Middle Initial)		Transaction ID: SB23.5918																					
B. TIM WALZ FOR US CONGRESS		Date of Disbursement																					
Mailing Address PO BOX 938		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	9		2	0	0	7														
City	State	Zip Code	Amount of Each Disbursement this Period																				
MANKATO	MN	56002	1000.00																				
Purpose of Disbursement		Category/Type																					
Candidate Name																							
Office Sought:	Disbursement For: 2008																						
<input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State: MN District: 1																							

Full Name (Last, First, Middle Initial)		Transaction ID: SB23.5925																					
C. UDALL, MARK E.		Date of Disbursement																					
Mailing Address P.O. Box A		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	1		2	0	0	7														
City	State	Zip Code	Amount of Each Disbursement this Period																				
Eldorado Springs	CO	80025	1000.00																				
Purpose of Disbursement		Category/Type																					
Candidate Name																							
Office Sought:	Disbursement For: 2008																						
<input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State: CO District: 2																							

SUBTOTAL of Disbursements This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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<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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Full Name (Last, First, Middle Initial) A. YARMUTH FOR CONGRESS		Transaction ID: SB23.5911	
Mailing Address 1819 Brownsboro Road Suite 100		Date of Disbursement MM / DD / YYYY 03 / 29 / 2007	
City Louisville	State KY	Zip Code 40206	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KY District: 3			

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	38350.00