

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		346040.89
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	925248.32									
(c) Total Receipts (from Line 19)	331290.34	1577254.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1256538.66	1923295.19								
7. Total Disbursements (from Line 31)	69602.03	736358.56								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1186936.63	1186936.63								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	331290.34	1577254.30
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))	331290.34	1577254.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	331290.34	1577254.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	69602.03	736358.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	69602.03	736358.56
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)	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))..	69602.03	736358.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	69602.03	736358.56

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	69602.03	736358.56
37. Offsets to Operating Expenditures (from Line 15, page 3)	331290.34	1577254.30
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-261688.31	-840895.74

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

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

FOR LINE NUMBER: PAGE 6 / 31

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) DNC SERVICES CORP.		Date of Receipt																					
	Mailing Address 430 SOUTH CAPITOL ST SE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		0	2		2	0	1	0														
	City State Zip Code WASHINGTON DC 20003		Transaction ID: SA15-1209																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23348.59																						
Name of Employer Occupation		Aggregate Year-to-Date ▼ 380465.44																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

B.	Full Name (Last, First, Middle Initial) DNC SERVICES CORP.		Date of Receipt																					
	Mailing Address 430 SOUTH CAPITOL ST SE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		0	2		2	0	1	0														
	City State Zip Code WASHINGTON DC 20003		Transaction ID: SA15-1208																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19700.00																						
Name of Employer Occupation		Aggregate Year-to-Date ▼ 380465.44																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

C.	Full Name (Last, First, Middle Initial) DNC SERVICES CORP.		Date of Receipt																					
	Mailing Address 430 SOUTH CAPITOL ST SE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		0	5		2	0	1	0														
	City State Zip Code WASHINGTON DC 20003		Transaction ID: SA15-1210																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7097.39																						
Name of Employer Occupation		Aggregate Year-to-Date ▼ 380465.44																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional)	50145.98
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 / 31
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A. Full Name (Last, First, Middle Initial)
DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

Mailing Address 120 MARYLAND AVENUE NE

City State Zip Code
WASHINGTON DC 20002

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44512.53

Date of Receipt
MM / DD / YYYY
08 / 09 / 2010

Transaction ID: SA15-1211

Amount of Each Receipt this Period
31512.53

B. Full Name (Last, First, Middle Initial)
DNC SERVICES CORP.

Mailing Address 430 SOUTH CAPITOL ST SE

City State Zip Code
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380465.44

Date of Receipt
MM / DD / YYYY
08 / 10 / 2010

Transaction ID: SA15-1213

Amount of Each Receipt this Period
18043.20

C. Full Name (Last, First, Middle Initial)
DNC SERVICES CORP.

Mailing Address 430 SOUTH CAPITOL ST SE

City State Zip Code
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380465.44

Date of Receipt
MM / DD / YYYY
08 / 10 / 2010

Transaction ID: SA15-1212

Amount of Each Receipt this Period
17606.18

SUBTOTAL of Receipts This Page (optional) ► **67161.91**

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 8 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A. Full Name (Last, First, Middle Initial)
DNC SERVICES CORP.
Mailing Address 430 SOUTH CAPITOL ST SE
City WASHINGTON State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380465.44
Date of Receipt 08 / 10 / 2010
Transaction ID: SA15-1214
Amount of Each Receipt this Period 20539.75

B. Full Name (Last, First, Middle Initial)
Democratic Party of Wisconsin
Mailing Address 110 King Street, Suite 203
City Madison State WI Zip Code 53703
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 16864.01
Date of Receipt 08 / 17 / 2010
Transaction ID: SA15-1216
Amount of Each Receipt this Period 4364.01

C. Full Name (Last, First, Middle Initial)
Barrett for Wisconsin
Mailing Address 7720 Rogers Avenue
City Milwaukee State WI Zip Code 53212
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 17378.79
Date of Receipt 08 / 17 / 2010
Transaction ID: SA15-1215
Amount of Each Receipt this Period 17378.79

SUBTOTAL of Receipts This Page (optional) ► 42282.55
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 9 / 31
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A. Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET SE

City State Zip Code
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
87443.15

Date of Receipt
MM / DD / YYYY
08 / 17 / 2010

Transaction ID: SA15-1217

Amount of Each Receipt this Period
46295.15

B. Full Name (Last, First, Middle Initial)
DNC SERVICES CORP.

Mailing Address 430 SOUTH CAPITOL ST SE

City State Zip Code
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380465.44

Date of Receipt
MM / DD / YYYY
08 / 19 / 2010

Transaction ID: SA15-1218

Amount of Each Receipt this Period
24000.00

C. Full Name (Last, First, Middle Initial)
Strickland for Governor

Mailing Address 65 E State Street, Suite 1800

City State Zip Code
Columbus OH 43215

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22276.71

Date of Receipt
MM / DD / YYYY
08 / 23 / 2010

Transaction ID: SA15-1219

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **85295.15**

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 10 / 31

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) Murray Victory 2010		Date of Receipt MM / DD / YYYY 08 / 24 / 2010		
	Mailing Address 1341 G Street, NW, Suite 740		Transaction ID: SA15-1220		
	City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 34913.56	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 47913.56			

B.	Full Name (Last, First, Middle Initial) FLORIDA DEMOCRATIC PARTY		Date of Receipt MM / DD / YYYY 08 / 25 / 2010		
	Mailing Address 214 SOUTH BRONOUGH STREET		Transaction ID: SA15-1221		
	City TALLAHASSEE	State FL	Zip Code 32301	Amount of Each Receipt this Period 44344.08	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 44344.08			

C.	Full Name (Last, First, Middle Initial) Strickland for Governor		Date of Receipt MM / DD / YYYY 08 / 26 / 2010		
	Mailing Address 65 E State Street, Suite 1800		Transaction ID: SA15-1222		
	City Columbus	State OH	Zip Code 43215	Amount of Each Receipt this Period 7147.11	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 22276.71			

SUBTOTAL of Receipts This Page (optional)	▶	86404.75
TOTAL This Period (last page this line number only)	▶	331290.34

**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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) Harvey Greene	Transaction ID: SB21B-1121 Date of Disbursement 08 / 04 / 2010
	Mailing Address 7589 NW 117TH LANE	Amount of Each Disbursement this Period 27.00
	City PARKLAND State FL Zip Code 33076	
	Purpose of Disbursement Travel Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Harvey Greene	Transaction ID: SB21B-1122 Date of Disbursement 08 / 04 / 2010
	Mailing Address 7589 NW 117TH LANE	Amount of Each Disbursement this Period 25.00
	City PARKLAND State FL Zip Code 33076	
	Purpose of Disbursement Airline Baggage Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Harvey Greene	Transaction ID: SB21B-1123 Date of Disbursement 08 / 04 / 2010
	Mailing Address 7589 NW 117TH LANE	Amount of Each Disbursement this Period 363.00
	City PARKLAND State FL Zip Code 33076	
	Purpose of Disbursement Travel & Subsistence Expense Reimb	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	415.00
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) CATHERINE S. WELKER Mailing Address 2130 P Street, NW, #219 City Washington State DC Zip Code 20037 Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1126 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 40.00
B.	Full Name (Last, First, Middle Initial) CATHERINE S. WELKER Mailing Address 2130 P Street, NW, #219 City Washington State DC Zip Code 20037 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1127 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 252.00
C.	Full Name (Last, First, Middle Initial) CATHERINE S. WELKER Mailing Address 2130 P Street, NW, #219 City Washington State DC Zip Code 20037 Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1128 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 39.00

SUBTOTAL of Disbursements This Page (optional) ▶	331.00
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 / 31

<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) CATHERINE S. WELKER	Transaction ID: SB21B-1129 Date of Disbursement 08 / 05 / 2010
	Mailing Address 2130 P Street, NW, #219	Amount of Each Disbursement this Period 363.00
	City Washington State DC Zip Code 20037	
	Purpose of Disbursement Travel & Subsistence Expense Reimb	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sara Knowles	Transaction ID: SB21B-1130 Date of Disbursement 08 / 10 / 2010
	Mailing Address 1449 Corcoran St., NW, Apt 3	Amount of Each Disbursement this Period 75.20
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Travel Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sara Knowles	Transaction ID: SB21B-1131 Date of Disbursement 08 / 10 / 2010
	Mailing Address 1449 Corcoran St., NW, Apt 3	Amount of Each Disbursement this Period 700.00
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Travel & Subsistence Expense Reimb	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1138.20
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 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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) Nicole Lynch	Transaction ID: SB21B-1132 Date of Disbursement 08 / 10 / 2010
	Mailing Address 7830 Cedar Lane	
	City Elkins Park State PA Zip Code 19027	Amount of Each Disbursement this Period 135.55
	Purpose of Disbursement Travel Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Nicole Lynch	Transaction ID: SB21B-1133 Date of Disbursement 08 / 10 / 2010
	Mailing Address 7830 Cedar Lane	
	City Elkins Park State PA Zip Code 19027	Amount of Each Disbursement this Period 700.00
	Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Josh Nerpel	Transaction ID: SB21B-1134 Date of Disbursement 08 / 10 / 2010
	Mailing Address 1629 Columbia Rd., NW, Apt 630	
	City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period 700.00
	Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1535.55
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

<p>A. Full Name (Last, First, Middle Initial) Cole Randle</p> <p>Mailing Address 8200 Wisconsin Ave., NW, #1417</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Travel & Subsistence Expense Reimb</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1135</p> <p>Date of Disbursement 08 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 700.00</p>
<p>B. Full Name (Last, First, Middle Initial) IAN ROSE</p> <p>Mailing Address 147 D Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1136</p> <p>Date of Disbursement 08 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 128.00</p>
<p>C. Full Name (Last, First, Middle Initial) IAN ROSE</p> <p>Mailing Address 147 D Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Airline Baggage Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1137</p> <p>Date of Disbursement 08 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

853.00

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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) IAN ROSE	Transaction ID: SB21B-1138
	Mailing Address 147 D Street, SE	Date of Disbursement 08 / 12 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 308.00
	Purpose of Disbursement Travel & Subsistence Expense Reimb	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) IAN ROSE	Transaction ID: SB21B-1139
	Mailing Address 147 D Street, SE	Date of Disbursement 08 / 12 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 5.60
	Purpose of Disbursement Events-Misc. Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) IAN ROSE	Transaction ID: SB21B-1140
	Mailing Address 147 D Street, SE	Date of Disbursement 08 / 12 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 237.00
	Purpose of Disbursement Travel Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	550.60
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) IAN ROSE	Transaction ID: SB21B-1141
	Mailing Address 147 D Street, SE	Date of Disbursement 08 / 12 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 252.00
	Purpose of Disbursement Travel & Subsistence Expense Reimb	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ALESCIA TEEL	Transaction ID: SB21B-1142
	Mailing Address 63 CORYELL STREET, APT. D	Date of Disbursement 08 / 12 / 2010
	City LAMBERTVILLE State NJ Zip Code 08530	Amount of Each Disbursement this Period 319.50
	Purpose of Disbursement Travel & Subsistence Expense Reimb	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ALESCIA TEEL	Transaction ID: SB21B-1143
	Mailing Address 63 CORYELL STREET, APT. D	Date of Disbursement 08 / 12 / 2010
	City LAMBERTVILLE State NJ Zip Code 08530	Amount of Each Disbursement this Period 364.00
	Purpose of Disbursement Travel & Subsistence Expense Reimb	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	935.50
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address P O BOX 1270 City NEWARK State NJ Zip Code 07101 Purpose of Disbursement Travel Agent fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1157 Date of Disbursement 08 / 18 / 2010
	Amount of Each Disbursement this Period 1100.00 See Attached Memo Entry

B. Full Name (Last, First, Middle Initial) Travel Agency Service Mailing Address 3415 E Kiehl Ave City Little Rock State AR Zip Code 72205 Purpose of Disbursement Travel Agent fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1157-10000 Date of Disbursement 08 / 18 / 2010
	Amount of Each Disbursement this Period 1100.00 [MEMO ITEM] Memo Entry

C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address P O BOX 1270 City NEWARK State NJ Zip Code 07101 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1158 Date of Disbursement 08 / 18 / 2010
	Amount of Each Disbursement this Period 24611.19 See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶	25711.19
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 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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address 4333 Amon Carter Boulevard</p> <p>City Fort Worth State TX Zip Code 76155</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1158-10000</p> <p>Date of Disbursement 08 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 11595.30</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Delta Air Lines, Inc.</p> <p>Mailing Address 1030 Delta Boulevard</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1158-20000</p> <p>Date of Disbursement 08 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 2147.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 77 W. Wacker Drive</p> <p>City Chicago State IL Zip Code 60601</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1158-30000</p> <p>Date of Disbursement 08 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 5645.81</p> <p>[MEMO ITEM] Memo Entry</p>

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)

<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.

Full Name (Last, First, Middle Initial)
US Airways Group Inc.

Mailing Address 111 W. Rio Salado Pkwy

City State Zip Code
Tempe AZ 85281

Purpose of Disbursement

Airfare

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1158-40000

Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

5223.08

[MEMO ITEM]
Memo Entry

B.

Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address P O BOX 1270

City State Zip Code
NEWARK NJ 07101

Purpose of Disbursement

Train Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1159

Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

636.00

See Attached Memo Entry

C.

Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address Union Station
50 Massachusetts Ave., NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement

Train Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1159-10000

Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

636.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

636.00

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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB21B-1160 Date of Disbursement 08 / 18 / 2010
	Mailing Address P O BOX 1270	
	City NEWARK State NJ Zip Code 07101	Amount of Each Disbursement this Period 23440.07
	Purpose of Disbursement Lodging & Catering Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry

B.	Full Name (Last, First, Middle Initial) Courtyard Marriott Chapel Hill	Transaction ID: SB21B-1160-10000 Date of Disbursement 08 / 18 / 2010
	Mailing Address 100 Marriott Way	
	City Chapel Hill State NC Zip Code 27517	Amount of Each Disbursement this Period 1863.18
	Purpose of Disbursement Lodging & Catering Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Hilton Garden Inn Cleveland	Transaction ID: SB21B-1160-20000 Date of Disbursement 08 / 18 / 2010
	Mailing Address 4900 Emerald Court Southwest	
	City Cleveland State OH Zip Code 44135	Amount of Each Disbursement this Period 251.25
	Purpose of Disbursement Lodging & Catering Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Memo Entry

SUBTOTAL of Disbursements This Page (optional)	▶	23440.07
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.

Full Name (Last, First, Middle Initial)
Hotel Indigo Dallas

Mailing Address 1933 Main Street

City Dallas State TX Zip Code 75201

Purpose of Disbursement
Lodging & Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1160-30000
Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

5499.00

[MEMO ITEM]
Memo Entry

B.

Full Name (Last, First, Middle Initial)
Hyatt Place

Mailing Address 45 West North Street

City Bethlehem State PA Zip Code 18018

Purpose of Disbursement
Lodging & Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1160-40000
Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

1491.00

[MEMO ITEM]
Memo Entry

C.

Full Name (Last, First, Middle Initial)
JW Marriott at L.A. Live

Mailing Address 900 West Olympic Boulevard

City Los Angeles State CA Zip Code 90015

Purpose of Disbursement
Lodging & Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1160-50000
Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

462.45

[MEMO ITEM]
Memo Entry

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)

<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) Sheraton Columbia Downtown <hr/> Mailing Address 1400 Main Street <hr/> City Columbia State SC Zip Code 29201 <hr/> Purpose of Disbursement Lodging & Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1160-60000 Date of Disbursement 08 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 597.82 <hr/> [MEMO ITEM] Memo Entry
B.	Full Name (Last, First, Middle Initial) Sheraton Palo Alto <hr/> Mailing Address 625 El Camino Real <hr/> City Palo Alto State CA Zip Code 94301 <hr/> Purpose of Disbursement Lodging & Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1160-70000 Date of Disbursement 08 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 1818.16 <hr/> [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) Sheraton Suites Wilmington <hr/> Mailing Address 422 Delaware Avenue <hr/> City Wilmington State DE Zip Code 19801 <hr/> Purpose of Disbursement Lodging & Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1160-80000 Date of Disbursement 08 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 269.00 <hr/> [MEMO ITEM] Memo Entry

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)

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<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A. Full Name (Last, First, Middle Initial) THE LOEWS REGENCY HOTEL Mailing Address 540 Park Avenue City New York State NY Zip Code 10065 Purpose of Disbursement Lodging & Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1160-90000 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 11188.21 [MEMO ITEM] Memo Entry

B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address P O BOX 1270 City NEWARK State NJ Zip Code 07101 Purpose of Disbursement Car Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1161 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 9282.94 See Attached Memo Entry

C. Full Name (Last, First, Middle Initial) American Traffic Solutions Mailing Address 7681 E. Gray Road City Scottsdale State AZ Zip Code 85260 Purpose of Disbursement Car Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1161-10000 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period -50.00 [MEMO ITEM] Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶	9282.94
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

<p>A. Full Name (Last, First, Middle Initial) AVIS RENT-A-CAR</p> <p>Mailing Address 2000 Arch Street</p> <p>City Philadelphia State PA Zip Code 19103</p> <p>Purpose of Disbursement Car Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1161-20000 Date of Disbursement 08 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 661.15</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) AVIS RENT-A-CAR</p> <p>Mailing Address 7432 New Ridge Road</p> <p>City Hanover State MD Zip Code 21076</p> <p>Purpose of Disbursement Car Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1161-30000 Date of Disbursement 08 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 146.12</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR</p> <p>Mailing Address 1722 M Street, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Car Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1161-40000 Date of Disbursement 08 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 294.57</p> <p>[MEMO ITEM] Memo Entry</p>

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)

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<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) Avis Rent-A-Car	Transaction ID: SB21B-1161-50000 Date of Disbursement 08 / 18 / 2010
	Mailing Address Dallas-Fort Worth Airport 2424 East 38th Street	Amount of Each Disbursement this Period 2312.50
	City: Dallas State: TX Zip Code: 75261	
	Purpose of Disbursement: Car Rental	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

B.	Full Name (Last, First, Middle Initial) Budget Rent-A-Car	Transaction ID: SB21B-1161-60000 Date of Disbursement 08 / 18 / 2010
	Mailing Address 30th St Train Station & Market	Amount of Each Disbursement this Period 440.76
	City: Philadelphia State: PA Zip Code: 19103	
	Purpose of Disbursement: Car Rental	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Enterprise Rent A Car	Transaction ID: SB21B-1161-70000 Date of Disbursement 08 / 18 / 2010
	Mailing Address PO Box 795153	Amount of Each Disbursement this Period 871.81
	City: St. Louis State: MO Zip Code: 63179	
	Purpose of Disbursement: Car Rental	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

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)

<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) Hertz Car Rental	Transaction ID: SB21B-1161-80000 Date of Disbursement 08 / 18 / 2010
	Mailing Address Orlando Intl Airport 5601 Butler National Drive	Amount of Each Disbursement this Period 28.21
	City: Orlando State: FL Zip Code: 32801	
	Purpose of Disbursement: Car Rental	
	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:	[MEMO ITEM] Memo Entry

B.	Full Name (Last, First, Middle Initial) Hertz Car Rental	Transaction ID: SB21B-1161-90000 Date of Disbursement 08 / 18 / 2010
	Mailing Address Cleveland Hopkins Airport 19601 Maplewood Avenue	Amount of Each Disbursement this Period 630.75
	City: Cleveland State: OH Zip Code: 44135	
	Purpose of Disbursement: Car Rental	
	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:	[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Hertz Car Rental	Transaction ID: SB21B-1161-100000 Date of Disbursement 08 / 18 / 2010
	Mailing Address Los Angeles Intl Airport 9000 Airport Boulevard	Amount of Each Disbursement this Period 1139.34
	City: Los Angeles State: CA Zip Code: 90045	
	Purpose of Disbursement: Car Rental	
	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:	[MEMO ITEM] Memo Entry

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)

<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) HERTZ-RENT-A-CAR	Transaction ID: SB21B-1161-110000 Date of Disbursement 08 / 18 / 2010
	Mailing Address Union Station 50 Massachusetts Avenue	Amount of Each Disbursement this Period 697.21
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement Car Rental	
	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:	
		[MEMO ITEM] Memo Entry

B.	Full Name (Last, First, Middle Initial) Hertz Car Rental	Transaction ID: SB21B-1161-120000 Date of Disbursement 08 / 18 / 2010
	Mailing Address Denver Intl Airport 24890 East 78th Avenue	Amount of Each Disbursement this Period 1130.71
	City Denver State CO Zip Code 80249	
	Purpose of Disbursement Car Rental	
	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:	
		[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Hertz Car Rental	Transaction ID: SB21B-1161-130000 Date of Disbursement 08 / 18 / 2010
	Mailing Address Raleigh-Durham Intl Airport 1017 Rental Car Drive	Amount of Each Disbursement this Period 715.71
	City Raleigh State NC Zip Code 27601	
	Purpose of Disbursement Car Rental	
	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:	
		[MEMO ITEM] Memo Entry

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)

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<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A. Full Name (Last, First, Middle Initial) Budget Car Rental <hr/> Mailing Address Columbia Metro Airport 3010 Aviation Way <hr/> City West Columbia State SC Zip Code 29170 <hr/> Purpose of Disbursement Car Rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1161-140000 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 264.10 [MEMO ITEM] Memo Entry

B. Full Name (Last, First, Middle Initial) Miriam S. Briskman <hr/> Mailing Address 2250 Clarendon Blvd., Apt 107 <hr/> City Arlington State VA Zip Code 22201 <hr/> Purpose of Disbursement Travel Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1149 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 155.00

C. Full Name (Last, First, Middle Initial) Miriam S. Briskman <hr/> Mailing Address 2250 Clarendon Blvd., Apt 107 <hr/> City Arlington State VA Zip Code 22201 <hr/> Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1150 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 319.50

SUBTOTAL of Disbursements This Page (optional) ▶	474.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A.	Full Name (Last, First, Middle Initial) ALI MERALI	Transaction ID: SB21B-1151 Date of Disbursement 08 / 25 / 2010
	Mailing Address 137 Mt. Auburn Street, Apt 1	Amount of Each Disbursement this Period 179.05
	City Cambridge State MA Zip Code 02138	
	Purpose of Disbursement Travel Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ALI MERALI	Transaction ID: SB21B-1152 Date of Disbursement 08 / 25 / 2010
	Mailing Address 137 Mt. Auburn Street, Apt 1	Amount of Each Disbursement this Period 25.00
	City Cambridge State MA Zip Code 02138	
	Purpose of Disbursement Airline Baggage Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bellagio	Transaction ID: SB21B-1153 Date of Disbursement 08 / 26 / 2010
	Mailing Address 3600 Las Vegas Blvd. South	Amount of Each Disbursement this Period 3756.28
	City Las Vegas State NV Zip Code 89109	
	Purpose of Disbursement Lodging & Catering Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3960.33

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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

<p>A. Full Name (Last, First, Middle Initial) Evelyn Marie Prentice</p> <p>Mailing Address 634 Kling Street, Apt A</p> <p>City Akron State OH Zip Code 44311</p> <p>Purpose of Disbursement Events-Misc. Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1154 Date of Disbursement 08 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 7.65</p>
<p>B. Full Name (Last, First, Middle Initial) Evelyn Marie Prentice</p> <p>Mailing Address 634 Kling Street, Apt A</p> <p>City Akron State OH Zip Code 44311</p> <p>Purpose of Disbursement Airline Baggage Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1155 Date of Disbursement 08 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p>C. Full Name (Last, First, Middle Initial) Evelyn Marie Prentice</p> <p>Mailing Address 634 Kling Street, Apt A</p> <p>City Akron State OH Zip Code 44311</p> <p>Purpose of Disbursement Travel & Subsistence Expense Reimb</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1156 Date of Disbursement 08 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 280.50</p>

SUBTOTAL of Disbursements This Page (optional)	338.15
TOTAL This Period (last page this line number only)	69602.03