

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Association of State Democratic Chairs

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		46745.82
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	81577.32									
(c) Total Receipts (from Line 19)	0.00	77286.18								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	81577.32	124032.00								
7. Total Disbursements (from Line 31)	9484.89	51939.57								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	72092.43	72092.43								
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
Association of State Democratic Chairs

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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	0.00	0.00
(i) Itemized (use Schedule A)	0.00	300.00
(ii) Unitemized	0.00	300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	300.00
(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	300.00
12. Transfers From Affiliated/Other Party Committees	0.00	76986.18
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	77286.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	77286.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	9484.89	51939.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	9484.89	51939.57
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))..	9484.89	51939.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9484.89	51939.57

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)	0.00	300.00
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	300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9484.89	51939.57
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9484.89	51939.57

Form/Schedule : **F3XN**

Transaction ID :

The Committee has very limited administrative expenses because it contracts for services and does not maintain an office or staff. What administrative costs it does incur are primarily, if not exclusively, for travel and meeting expenses. These limited administrative costs are fully disclosed on its reports.

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

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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Sprint PCS	Transaction ID: 21b-01-02131-03937
	Mailing Address PO Box 62071	Date of Disbursement 04 / 01 / 2009
	City Baltimore State MD Zip Code 21264-2071	Amount of Each Disbursement this Period 125.10
	Purpose of Disbursement Telephone 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) Perkins Coie LLP	Transaction ID: 21b-01-02132-03938
	Mailing Address 1201 Third Avenue, 40th Floor	Date of Disbursement 04 / 01 / 2009
	City Seattle State WA Zip Code 98101-3099	Amount of Each Disbursement this Period 3300.00
	Purpose of Disbursement Legal 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) Grossman Marketing Group	Transaction ID: 21b-01-02133-03939
	Mailing Address 30 Cobble Hill Road	Date of Disbursement 04 / 06 / 2009
	City Somerville State MA Zip Code 02143	Amount of Each Disbursement this Period 569.59
	Purpose of Disbursement Office Supplies 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) ▶

3994.69

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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Standard Chair of Gardner	Transaction ID: 21b-01-02134-03940 Date of Disbursement
	Mailing Address 1 South Main Street	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Gardner State MA Zip Code 01440	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Furniture	<input type="text" value="417.00"/>
	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) American Express	Transaction ID: 21b-01-02142-0000 Date of Disbursement
	Mailing Address PO Box 114	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Newark State NJ Zip Code 07101-0114	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment - See Memos	<input type="text" value="4023.20"/>
	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) Yahoo.com	Transaction ID: 21b-01-02142-03983 Date of Disbursement
	Mailing Address 701 First Avenue	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Sunnyvale State CA Zip Code 94089	Amount of Each Disbursement this Period
	Purpose of Disbursement Email	<input type="text" value="34.95"/>
	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]

SUBTOTAL of Disbursements This Page (optional) ▶

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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 21b-01-02142-03992
	Mailing Address PO Box 114	Date of Disbursement 04 / 06 / 2009
	City Newark State NJ Zip Code 07101-0114	Amount of Each Disbursement this Period 14.99
	Purpose of Disbursement Flight Insurance Candidate Name	[MEMO ITEM]
	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) American Express	Transaction ID: 21b-01-02142-03990
	Mailing Address PO Box 114	Date of Disbursement 04 / 06 / 2009
	City Newark State NJ Zip Code 07101-0114	Amount of Each Disbursement this Period 14.99
	Purpose of Disbursement Flight Insurance Candidate Name	[MEMO ITEM]
	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) Southwest Airlines	Transaction ID: 21b-01-02142-03989
	Mailing Address PO Box 36647	Date of Disbursement 04 / 06 / 2009
	City Dallas State TX Zip Code 75235-1647	Amount of Each Disbursement this Period 299.20
	Purpose of Disbursement Airfare Candidate Name	[MEMO ITEM]
	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)	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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Mandarin Oriental	Transaction ID: 21b-01-02142-03988
	Mailing Address 1330 Maryland Avenue, SW	Date of Disbursement MM / DD / YYYY 04 / 06 / 2009
	City Washington State DC Zip Code 20024	Amount of Each Disbursement this Period 394.88
	Purpose of Disbursement Meals Candidate Name	[MEMO ITEM]
	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) Therapy	Transaction ID: 21b-01-02142-03987
	Mailing Address 348 W 52nd Street	Date of Disbursement MM / DD / YYYY 04 / 06 / 2009
	City New York State NY Zip Code 10019	Amount of Each Disbursement this Period 49.00
	Purpose of Disbursement Meals Candidate Name	[MEMO ITEM]
	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) Cosi Downtown	Transaction ID: 21b-01-02142-03986
	Mailing Address 1501 K Street	Date of Disbursement MM / DD / YYYY 04 / 06 / 2009
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period 47.67
	Purpose of Disbursement Meals Candidate Name	[MEMO ITEM]
	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)	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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Yahoo.com	Transaction ID: 21b-01-02142-03984 Date of Disbursement 04 / 06 / 2009
	Mailing Address 701 First Avenue	Amount of Each Disbursement this Period 34.95
	City Sunnyvale State CA Zip Code 94089	
	Purpose of Disbursement Email	[MEMO ITEM]
	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) Sonoma	Transaction ID: 21b-01-02142-03993 Date of Disbursement 04 / 06 / 2009
	Mailing Address 223 Pennsylvania Ave SE	Amount of Each Disbursement this Period 40.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Meals	[MEMO ITEM]
	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) Yahoo.com	Transaction ID: 21b-01-02142-03982 Date of Disbursement 04 / 06 / 2009
	Mailing Address 701 First Avenue	Amount of Each Disbursement this Period 34.95
	City Sunnyvale State CA Zip Code 94089	
	Purpose of Disbursement Email	[MEMO ITEM]
	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)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 19

<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)
Association of State Democratic Chairs

<p>A. Full Name (Last, First, Middle Initial) Talay Thai</p> <p>Mailing Address 406 1st St Se</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Meals</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: 21b-01-02142-03981</p> <p>Date of Disbursement</p> <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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">60.98</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	9	60.98
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	0	9													
60.98																						
<p>B. Full Name (Last, First, Middle Initial) Costco</p> <p>Mailing Address 999 Lake Drive</p> <p>City Issaquah State WA Zip Code 98027</p> <p>Purpose of Disbursement Office Supplies</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: 21b-01-02142-03980</p> <p>Date of Disbursement</p> <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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">75.24</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	9	75.24
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	0	9													
75.24																						
<p>C. Full Name (Last, First, Middle Initial) Teleflora</p> <p>Mailing Address PO Box 60910</p> <p>City Los Angeles State CA Zip Code 90060</p> <p>Purpose of Disbursement Gift</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: 21b-01-02142-03979</p> <p>Date of Disbursement</p> <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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">62.98</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	9	62.98
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	0	9													
62.98																						

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 13 / 19

<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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Cosi Downtown	Transaction ID: 21b-01-02142-03985 Date of Disbursement																			
	Mailing Address 1501 K Street	<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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	0	9												
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Meals	<table border="1"><tr><td>7.03</td></tr></table>	7.03																		
7.03																					
	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																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Sunoco	Transaction ID: 21b-01-02142-04003 Date of Disbursement																			
	Mailing Address 1735 Market Street, Suite LL	<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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	0	9												
	City Philadelphia State PA Zip Code 19103-7583	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fuel	<table border="1"><tr><td>21.70</td></tr></table>	21.70																		
21.70																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Mourayo	Transaction ID: 21b-01-02142-04010 Date of Disbursement																			
	Mailing Address 1732 Connecticut Ave NW #100	<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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	0	9												
	City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Meals	<table border="1"><tr><td>33.05</td></tr></table>	33.05																		
33.05																					
	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																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 21b-01-02142-04009 Date of Disbursement																			
	Mailing Address PO Box 114	<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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	9													
	City Newark State NJ Zip Code 07101-0114	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fees Refund	<table border="1"><tr><td>-4.42</td></tr></table>	-4.42																		
-4.42																					
	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]																			

B.	Full Name (Last, First, Middle Initial) Fairfield Inn	Transaction ID: 21b-01-02142-04008 Date of Disbursement																			
	Mailing Address 100 Miles Drive	<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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	9													
	City Wallingford State CT Zip Code 06492	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Lodging	<table border="1"><tr><td>88.48</td></tr></table>	88.48																		
88.48																					
	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]																			

C.	Full Name (Last, First, Middle Initial) ExxonMobil	Transaction ID: 21b-01-02142-04007 Date of Disbursement																			
	Mailing Address 3225 Gallows Road	<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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	9													
	City Fairfax State VA Zip Code 22037	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fuel	<table border="1"><tr><td>23.76</td></tr></table>	23.76																		
23.76																					
	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]																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 / 19

<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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Bullfeathers Mailing Address 401 1st Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Meals 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: 21b-01-02142-04006 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 9 Amount of Each Disbursement this Period 61.85 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address PO Box 36647 City Dallas State TX Zip Code 75235-1647 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: 21b-01-02142-03991 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 9 Amount of Each Disbursement this Period 139.20 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Park Service LLC Mailing Address 420 E 51st St City New York State NY Zip Code 10022 Purpose of Disbursement Parking 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: 21b-01-02142-04004 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 9 Amount of Each Disbursement this Period 168.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 16 / 19

<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)
Association of State Democratic Chairs

<p>A. Full Name (Last, First, Middle Initial) Caruso Florist</p> <p>Mailing Address 1717 M Street, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Flowers</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: 21b-01-02142-03994</p> <p>Date of Disbursement MM / DD / YYYY 04 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 79.31</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Sheraton Hotels</p> <p>Mailing Address 41 South Salisbury Street</p> <p>City Raleigh State NC Zip Code 27601</p> <p>Purpose of Disbursement Lodging</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: 21b-01-02142-04002</p> <p>Date of Disbursement MM / DD / YYYY 04 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 678.31</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 10 G Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Transportation</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: 21b-01-02142-04001</p> <p>Date of Disbursement MM / DD / YYYY 04 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 140.00</p> <p>[MEMO ITEM]</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)

PAGE 17 / 19

<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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Sheraton Hotels	Transaction ID: 21b-01-02142-04000
	Mailing Address 41 South Salisbury Street	Date of Disbursement MM / DD / YYYY 04 / 06 / 2009
	City Raleigh State NC Zip Code 27601	Amount of Each Disbursement this Period 485.31
	Purpose of Disbursement Lodging	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Dubliner Restaurant	Transaction ID: 21b-01-02142-03999
	Mailing Address 520 N Capitol St NW	Date of Disbursement MM / DD / YYYY 04 / 06 / 2009
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 173.05
	Purpose of Disbursement Meals	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 21b-01-02142-03998
	Mailing Address PO Box 114	Date of Disbursement MM / DD / YYYY 04 / 06 / 2009
	City Newark State NJ Zip Code 07101-0114	Amount of Each Disbursement this Period 14.99
	Purpose of Disbursement Flight Insurance	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 19

<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)
Association of State Democratic Chairs

A. Full Name (Last, First, Middle Initial) Floriana Mercury Grill <hr/> Mailing Address 1602 17th St NW <hr/> City Washington State DC Zip Code 20009 Purpose of Disbursement Meals 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: 21b-01-02142-03997 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 212.55
	[MEMO ITEM]
	Category/Type
B. Full Name (Last, First, Middle Initial) Mourayo <hr/> Mailing Address 1732 Connecticut Ave NW #100 <hr/> City Washington State DC Zip Code 20009 Purpose of Disbursement Meals 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: 21b-01-02142-03996 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 308.55
	[MEMO ITEM]
	Category/Type
C. Full Name (Last, First, Middle Initial) Southwest Airlines <hr/> Mailing Address PO Box 36647 <hr/> City Dallas State TX Zip Code 75235-1647 Purpose of Disbursement Airfare 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: 21b-01-02142-03995 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 204.20
	[MEMO ITEM]
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 19

<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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) ExxonMobil	Transaction ID: 21b-01-02142-04005
	Mailing Address 3225 Gallows Road	Date of Disbursement MM / DD / YYYY 04 / 06 / 2009
	City State Zip Code Fairfax VA 22037	Amount of Each Disbursement this Period 23.50
	Purpose of Disbursement Fuel	[MEMO ITEM]
	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) Eric Young-Mercer	Transaction ID: 21b-01-02136-03942
	Mailing Address 2400 Queens Chapel Road	Date of Disbursement MM / DD / YYYY 04 / 14 / 2009
	City State Zip Code Hyattsville MD 20782	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Intern Stipend	[MEMO ITEM]
	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) Patton Technologies, LLC	Transaction ID: 21b-01-02137-03943
	Mailing Address 2333 Alexandria Dr.	Date of Disbursement MM / DD / YYYY 04 / 14 / 2009
	City State Zip Code Lexington KY 40504	Amount of Each Disbursement this Period 900.00
	Purpose of Disbursement Compliance Services	[MEMO ITEM]
	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)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	9484.89