

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
21st Century Majority Fund

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

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		135583.85
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	72087.00									
(c) Total Receipts (from Line 19)	31500.00	57060.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	103587.00	192643.85								
7. Total Disbursements (from Line 31)	10059.86	99116.71								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	93527.14	93527.14								
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
21st Century Majority Fund

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

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	1000.00
(ii) Unitemized	0.00	60.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	1060.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	31500.00	56000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	31500.00	57060.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	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))	31500.00	57060.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	31500.00	57060.00

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.....	3059.86	36585.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3059.86	36585.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	60000.00
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	2531.00
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))..	10059.86	99116.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10059.86	99116.71

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)	31500.00	57060.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31500.00	57060.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3059.86	36585.71
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3059.86	36585.71

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
21st Century Majority Fund

A.	Full Name (Last, First, Middle Initial) National Association of Chain Drug Store		Date of Receipt
	Mailing Address 413 N Lee St PO Box 1417-D49		<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Alexandria	State VA	Zip Code 22314
	FEC ID number of contributing federal political committee. C C00022368		Transaction ID: AD0777A0646B74AE095C
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	Amount of Each Receipt this Period 2500.00

B.	Full Name (Last, First, Middle Initial) Air Line Pilots Association PAC		Date of Receipt
	Mailing Address Attn: Mr. Brendan M. Kenney 1625 Massachusetts Avenue, NW		<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Washington	State DC	Zip Code 20036
	FEC ID number of contributing federal political committee. C C00035451		Transaction ID: A784B03DD15A04FAF838
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	Amount of Each Receipt this Period 2500.00

C.	Full Name (Last, First, Middle Initial) CSX Good Government Fund		Date of Receipt
	Mailing Address Attn: Mr. Stephen Flippin 1331 Pennsylvania Ave., NW		<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Washington	State DC	Zip Code 20004
	FEC ID number of contributing federal political committee. C C00163832		Transaction ID: AB54FAB26AADA4574884
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional)	10000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 12
(check only one)

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

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NAME OF COMMITTEE (In Full)
21st Century Majority Fund

A. Full Name (Last, First, Middle Initial)
AT&T, Inc. Federal PAC

Mailing Address Attn: Mr. Kent Wells
1133 21st Street, NW, Suite 900

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2010

Transaction ID: ADF62440ACB934EC2B8A

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Burlington Northern Santa Fe Railway Com

Mailing Address Attn: Ms. Patricia A. Murphy
500 New Jersey Ave NW Ste 550

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2010

Transaction ID: AD8A484518E4D4B8993C

Amount of Each Receipt this Period
4000.00

C. Full Name (Last, First, Middle Initial)
International Paper PAC

Mailing Address Attn: Mr. John Runyon
1101 Pennsylvania Ave NW

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2010

Transaction ID: ABAD24C28249C489D9DC

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **9000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 12
(check only one)

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

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NAME OF COMMITTEE (In Full)
21st Century Majority Fund

A.

Full Name (Last, First, Middle Initial) Union Pacific Fund for Effective Govt		Date of Receipt MM / DD / YYYY 07 / 27 / 2010
Mailing Address Attn: Mr. Printz Bolin 600 13th Street, NW, Suite 340		Transaction ID: A2C81938EE7C04438950
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00010470		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.

Full Name (Last, First, Middle Initial) National Emergency Medicine PAC		Date of Receipt MM / DD / YYYY 07 / 28 / 2010
Mailing Address Attn: Ms. Jeanne Slade 2121 K Street, NW, Suite 325		Transaction ID: AF2C36C43E3CA44DFB12
City Washington	State DC	Zip Code 20037
FEC ID number of contributing federal political committee. C C00140061		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.

Full Name (Last, First, Middle Initial) Norfolk Southern Good Govt Fund		Date of Receipt MM / DD / YYYY 07 / 30 / 2010
Mailing Address Attn: Mr. Marque I. Ledoux 3 Commercial Pl		Transaction ID: AF6DEE66F290F45539B5
City Norfolk	State VA	Zip Code 23510
FEC ID number of contributing federal political committee. C C00009282		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	31500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
21st Century Majority Fund

A. Full Name (Last, First, Middle Initial) Carithers Florist <hr/> Mailing Address Post Office Box 6529 <hr/> City Marietta State GA Zip Code 30065 <hr/> Purpose of Disbursement Flowers 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: B81E6A32F04D44ABF9CC Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 136.73
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Challenged Athletes Foundation <hr/> Mailing Address Team Operation Rebound PO Box 910769 <hr/> City San Diego State CA Zip Code 92191 <hr/> Purpose of Disbursement Donation 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: BF1D45C53C8CC40B0B8B Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Overton Park <hr/> Mailing Address 3625 Cumberland Blvd SE Ste 960 <hr/> City Atlanta State GA Zip Code 30339-6406 <hr/> Purpose of Disbursement Office Rent 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: B355329A109284FC9905 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 653.35
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1790.08

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 10 / 12

<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)
21st Century Majority Fund

<p>A. Full Name (Last, First, Middle Initial) Partnership Card Services-21</p> <p>Mailing Address Post Office Box 2181</p> <p>City Columbus State GA Zip Code 31902</p> <p>Purpose of Disbursement Credit Card Payment-See Below</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: BE163227E88F64EF192F</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1239.78</p> <p>Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address PO Box 20706</p> <p>City Atlanta State GA Zip Code 30320-6001</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B73C0D9FEF3B540FD820</p> <p>Date of Disbursement 05 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 219.40</p> <p>[MEMO ITEM] Airfare</p> <p>Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address PO Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement Telephone</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: BF6A47757869D4FF2B22</p> <p>Date of Disbursement 05 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 50.83</p> <p>[MEMO ITEM] Telephone</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1239.78

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

3029.86

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 11 / 12

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

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NAME OF COMMITTEE (In Full)
21st Century Majority Fund

A. Full Name (Last, First, Middle Initial) Austin Scott for Congress <hr/> Mailing Address PO Box 27750 <hr/> City Macon State GA Zip Code 31221 <hr/> Purpose of Disbursement Contribution Candidate Name Austin Scott Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B75003362C0F0405EBC1 Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/Type
	(Empty box)
B. Full Name (Last, First, Middle Initial) Toomey for Senate <hr/> Mailing Address PO Box 7272 <hr/> City Alexandria State VA Zip Code 22307 <hr/> Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BC2DA2B6501B047CC835 Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 2500.00
	Category/Type
	(Empty box)
C. Full Name (Last, First, Middle Initial) Dino Rossi for US Senate <hr/> Mailing Address PO Box 50713 <hr/> City Bellevue State WA Zip Code 98015 <hr/> Purpose of Disbursement Contribution Candidate Name Mr. Dino Rossi Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9036E22482534607B8A Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 2500.00
	Category/Type
	(Empty box)

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)

PAGE 12 / 12

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

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NAME OF COMMITTEE (In Full)
21st Century Majority Fund

A.

Full Name (Last, First, Middle Initial)
Susan Collins for Senator

Transaction ID: BA6462D4054714367961

Date of Disbursement

Mailing Address PO Box 1096

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	0

City State Zip Code
Bangor ME 04402

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

7000.00
