

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

ADDRESS (number and street) 1800 North Kent Street
Suite 1070
 Check if different than previously reported. (ACC)
Arlington VA 22209

2. **FEC IDENTIFICATION NUMBER** C00332296
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 03 2009 in the State of NY

5. Covering Period 10 15 2009 through 11 23 2009

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

Type or Print Name of Treasurer Frank Cannon

Signature of Treasurer Electronically Filed by Frank Cannon Date 12 03 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Report Covering the Period: From:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
2	3

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"><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		132051.35
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	37764.14									
(c) Total Receipts (from Line 19)	113746.12	123025.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	151510.26	255076.39								
7. Total Disbursements (from Line 31)	123621.73	227187.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27888.53	27888.53								
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

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Report Covering the Period: From:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
2	3

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		
(i) Itemized (use Schedule A)	65642.00	67892.00
(ii) Unitemized	42104.12	49133.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)	107746.12	117025.04
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	6000.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	113746.12	123025.04
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))	113746.12	123025.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	113746.12	123025.04

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.....	3262.58	4345.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3262.58	4345.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	8125.00
24. Independent Expenditure (use Schedule E)	107389.15	107389.15
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	2970.00	2709.00
(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))	2970.00	2709.00
29. Other Disbursements.....	5000.00	104619.68
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))..	123621.73	227187.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	123621.73	227187.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	113746.12	123025.04
34. Total Contribution Refunds (from Line 28(d))	2970.00	2709.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	110776.12	120316.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3262.58	4345.03
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3262.58	4345.03

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 93

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Nancy Alvord

Mailing Address 4939 Northeast Laurelcrest Lane

City State Zip Code
Seattle WA 98105-5244

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Private Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: 37D3428629FE0B49C82

Amount of Each Receipt this Period 5000.00

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

Mailing Address 4939 Northeast Laurelcrest Lane

City State Zip Code
Seattle WA 98105-5244

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Private Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: CD2C57B645854846B8D

Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
Richard Anthony

Mailing Address 702 Glenwood Road

City State Zip Code
Deland FL 32720-2371

FEC ID number of contributing federal political committee. C

Name of Employer IBM Occupation IT Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 512.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Transaction ID: 111009-296

Amount of Each Receipt this Period 512.00

SUBTOTAL of Receipts This Page (optional) 10512.00

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 / 93
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p>A. Full Name (Last, First, Middle Initial) Fletcher Armstrong</p> <p>Mailing Address 7577 Glastonbury Road</p> <p>City State Zip Code Knoxville TN 37931-1850</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Center for Bioethical Reform</p> <p>Occupation Southeast Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9</p> <p>Transaction ID: 111009-682</p> <p>Amount of Each Receipt this Period 250.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Myra Asplundh</p> <p>Mailing Address PO Box 11</p> <p>City State Zip Code Bryn Athyn PA 19009-0011</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 5 / 2 0 0 9</p> <p>Transaction ID: 6C4AD1A5A0C807F667B</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Paul Barry</p> <p>Mailing Address 10480 158th St. N</p> <p>City State Zip Code Jupiter FL 33478-9337</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Petro Skills</p> <p>Occupation Engineering Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 9</p> <p>Transaction ID: 111009-148</p> <p>Amount of Each Receipt this Period 250.00</p>
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SUBTOTAL of Receipts This Page (optional)	1500.00
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: (check only one)	PAGE 9 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Vernon Buchanan	Date of Receipt MM / DD / YYYY 11 / 02 / 2009
	Mailing Address 835 Longboat Club Road	Transaction ID: 5A9F3118803057987C2
	City State Zip Code Longboat Key FL 34228-3803	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation US House Congressman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Daniel Bunn	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 3102 Oak Lawn Ave Ste 700	Transaction ID: 348257022B2D0504E2A
	City State Zip Code Dallas TX 75219-4293	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Carol Crossed	Date of Receipt MM / DD / YYYY 11 / 04 / 2009
	Mailing Address 1675 Clover Street	Transaction ID: CA737E1AF70D932CCF3
	City State Zip Code Rochester NY 14618-2517	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Seamless Garment Network Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1850.00
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 10 / 93
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)
Anthony M. Cuniak

Mailing Address PO Box 35

City State Zip Code
South Park PA 15129-0035

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

Date of Receipt
MM / DD / YYYY
10 / 20 / 2009

Transaction ID: 66F3C459DCCC73B3978

Amount of Each Receipt this Period
300.00

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

B.

Full Name (Last, First, Middle Initial)
J. Christopher Donahue

Mailing Address 1001 Liberty Avenue Suite 850
the Beechwood Company

City State Zip Code
Pittsburgh PA 15222-3718

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

Date of Receipt
MM / DD / YYYY
10 / 21 / 2009

Transaction ID: 26CBC18FFB2120758C9

Amount of Each Receipt this Period
2000.00

Name of Employer Federated Investors Management Company Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

C.

Full Name (Last, First, Middle Initial)
John F. Donahue

Mailing Address 1001 Liberty Avenue
Suite 850

City State Zip Code
Pittsburgh PA 15222

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

Date of Receipt
MM / DD / YYYY
10 / 21 / 2009

Transaction ID: 1C60B65C06B9ACEE47F

Amount of Each Receipt this Period
2000.00

Name of Employer Federated Investors Tower Occupation Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

SUBTOTAL of Receipts This Page (optional) ► **4300.00**

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: (check only one)	PAGE 11 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
James and K. Theresa Dooher

Mailing Address 122 Orvilton Drive

City State Zip Code
Syracuse NY 13214-1615

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Transaction ID: 111009-139

Amount of Each Receipt this Period
3000.00

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

Mailing Address 779 Shallow Ridge Court

City State Zip Code
Abingdon MD 21009-3016

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

Name of Employer Retired Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 9

Transaction ID: 111009-623

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jim S. Fennell, Jr.

Mailing Address 6960 Killarney Drive

City State Zip Code
Beaumont TX 77706-4116

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

Name of Employer ExxonMobil Corportaion Occupation Process Safety Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 9

Transaction ID: A3EAC567CA069FAEE67

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **3750.00**

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: (check only one)	PAGE 12 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Maureen Ferguson	Date of Receipt MM / DD / YYYY 10 / 27 / 2009
	Mailing Address 4607 Harling Lane	Transaction ID: 6E23B5F5A7B6C6D0739
	City State Zip Code Bethesda MD 20814-3503	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Occupation Self Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ivan Garcia	Date of Receipt MM / DD / YYYY 11 / 03 / 2009
	Mailing Address 11909 Minor Jones Drive	Transaction ID: 58D1CDF0A4AA7C9B21D
	City State Zip Code Owings Mills MD 21117-1536	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed-Occupation Self-Employed Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Rebecca Garrett	Date of Receipt MM / DD / YYYY 10 / 27 / 2009
	Mailing Address 3401 Dundee Road	Transaction ID: 6ADF4BB99C14EB2F415
	City State Zip Code Longview TX 75604-1310	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Information Requested-Occupation Information Requested Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
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: (check only one)	PAGE 13 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Jane Geldermann	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 1410 Sheridan Road Apt. 5D	Transaction ID: 72B502C0563B9E9CFE5
	City State Zip Code Wilmette IL 60091-1896	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Housewife Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Joe Guiffre	Date of Receipt MM / DD / YYYY 11 / 02 / 2009
	Mailing Address 540 Second Street Apt. 301	Transaction ID: 7D6D2E9681CC41C8343
	City State Zip Code Alexandria VA 22314-1495	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Guiffre Dist. Company Retired Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) John Hasley	Date of Receipt MM / DD / YYYY 10 / 28 / 2009
	Mailing Address 8029 S Bridge Way	Transaction ID: 111009-556
	City State Zip Code Maumee OH 43537-8948	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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: (check only one)	PAGE 14 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Daniel Hoefflin	Date of Receipt MM / DD / YYYY 11 / 12 / 2009
	Mailing Address 911 Emerald Bay	Transaction ID: A486BFE107BA6C1B982
	City State Zip Code Laguna Beach CA 92651-1229	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Unisolove, Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Nancy L. Iredale	Date of Receipt MM / DD / YYYY 10 / 27 / 2009
	Mailing Address 515 S Flower Street FI 25	Transaction ID: 039A292F732519510FE
	City State Zip Code Los Angeles CA 90071-2201	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Paul Hastings Janofsky & Walker	Occupation Tax Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Robert J. Kania, Jr.	Date of Receipt MM / DD / YYYY 10 / 22 / 2009
	Mailing Address 1616 Cook School Road	Transaction ID: 258BFE9834DD429FC07
	City State Zip Code Upper St. Clair PA 15241-2606	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00	

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
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: (check only one)	PAGE 15 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Francis A. Keating	Date of Receipt MM / DD / YYYY 11 / 12 / 2009
	Mailing Address 111 Crest Lane	Transaction ID: 25215378B4857A61A42
	City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer AMERICAN COUNCIL OF LIFE INSURERS	Occupation President/ CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mary Kohler	Date of Receipt MM / DD / YYYY 10 / 19 / 2009
	Mailing Address PO Box 897	Transaction ID: F2A28B9C05348B98DE6
	City State Zip Code Sheboygan WI 53082-0897	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Windway Capital Corp.	Occupation Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7400.00	

C.	Full Name (Last, First, Middle Initial) Terry Kohler	Date of Receipt MM / DD / YYYY 10 / 19 / 2009
	Mailing Address PO Box 897	Transaction ID: F0E560FFF876D07D865
	City State Zip Code Sheboygan WI 53082-0897	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Windway Capital Corp.	Occupation President and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7400.00	

SUBTOTAL of Receipts This Page (optional)	10250.00
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: (check only one)	PAGE 16 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Keith Kostuch		Date of Receipt MM / DD / YYYY 11 / 05 / 2009		
	Mailing Address 4511 Lakeview Drive		Transaction ID: 3A95F5384BD73DB1A61		
	City Edina	State MN	Zip Code 55424-1517	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer ALLTEL Corp.	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Tim Kuehnert		Date of Receipt MM / DD / YYYY 10 / 27 / 2009		
	Mailing Address 5872 S 129th East Avenue		Transaction ID: 111009-94		
	City Tulsa	State OK	Zip Code 74134-6705	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Tulsa Direct Mail, Inc	Occupation Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Cindy Lagasse		Date of Receipt MM / DD / YYYY 10 / 27 / 2009		
	Mailing Address 176A Cross Creek Drive		Transaction ID: 111009-129		
	City Slidell	State LA	Zip Code 70461-2640	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer None	Occupation None			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	750.00
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 17 / 93
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Gary and Louise Lirette

Mailing Address 1129 Lane Highway 487

City Marthaville State LA Zip Code 71450

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 27 / 2009
Transaction ID: 111009-299
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Salvatore Lorito

Mailing Address 3225 Shore Parkway Apartment 3A

City Brooklyn State NY Zip Code 11235-4414

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

Name of Employer Retired Occupation Retiree

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 27 / 2009
Transaction ID: 111009-63
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Shane Macaulay

Mailing Address 3832 132nd Avenue Northeast

City Bellevue State WA Zip Code 98005-1308

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

Name of Employer Self-Employed Occupation N/A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 28 / 2009
Transaction ID: 111009-630
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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 18 / 93
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial) Jerry Mack		Date of Receipt MM / DD / YYYY 10 / 27 / 2009
Mailing Address 1800 Stokes Street Apt. 115		Transaction ID: 111009-503
City San Jose	State Zip Code CA 95126-4718	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Aixtron	Occupation Engineer	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Brian D. McAuley		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 253 Indian Trail Drive		Transaction ID: 111009-647
City Franklin Lakes	State Zip Code NJ 07417-1014	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Michael A McKenna		Date of Receipt MM / DD / YYYY 11 / 02 / 2009
Mailing Address 1406 Goswick Ridge Road		Transaction ID: 67248DD42C9BAA43047
City Midlothian	State Zip Code VA 23114-5515	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer MWR Strategies	Occupation President	Aggregate Year-to-Date 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1500.00
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: (check only one)	PAGE 19 / 93
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Andrew Z. Messinger	Date of Receipt MM / DD / YYYY 10 / 22 / 2009
	Mailing Address 7498 N Mount Hope Road	Transaction ID: ED2984C56AAC002C4A2
	City State Zip Code Riverdale MI 48877-9527	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Info Requested	Occupation Info Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Charles Moneke	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 886 San Juan Drive	Transaction ID: 111009-677
	City State Zip Code Alamogordo NM 88310-5366	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Info Requested US Air Force	Occupation Info Requested Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Eunice Montfort	Date of Receipt MM / DD / YYYY 10 / 27 / 2009
	Mailing Address 210 Fairway Drive	Transaction ID: 111009-153
	City State Zip Code Frankfort KY 40601-3816	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Info Requested Art's Electric, Inc.	Occupation Info Requested Human Resources Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	800.00
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: (check only one)	PAGE 20 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Maura Mudd	Date of Receipt MM / DD / YYYY 10 / 27 / 2009
	Mailing Address 3542 Newark Street Northwest	Transaction ID: 08FCB33AE5B13C3B2DF
	City State Zip Code Washington DC 20016-3168	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 5000.00	

B.	Full Name (Last, First, Middle Initial) Fernando Munoz	Date of Receipt MM / DD / YYYY 10 / 27 / 2009
	Mailing Address 2817 Glade Springs Drive Northeast	Transaction ID: 111009-166
	City State Zip Code Atlanta GA 30345-4029	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Scott G. Williams, LLC Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) Janice Obuchowski	Date of Receipt MM / DD / YYYY 10 / 20 / 2009
	Mailing Address 1340 Potomac School Rd	Transaction ID: 758CAE53FA9D89524EF
	City State Zip Code Mc Lean VA 22101-2331	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Freedom Technologies, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	5550.00
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: (check only one)	PAGE 21 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Jon Picou		Date of Receipt
	Mailing Address 503 Beau Chene Drive		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Mandeville	LA	70471-1728
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Attorney	Transaction ID: 111009-90
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Thomas J. Posatko		Date of Receipt
	Mailing Address 110 Neptune Drive		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Newark	DE	19711-3011
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Supportive Care Services, Inc.		Occupation Agency Director	Transaction ID: 626E881F4A467AFAB10
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

C.	Full Name (Last, First, Middle Initial) Peter Prina		Date of Receipt
	Mailing Address 7627 N Greenview Avenue Apt. 1D		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Chicago	IL	60626-1247
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Loyola University Chicago		Occupation Project Manager, Information Technology	Transaction ID: 111009-182
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="230.00"/>	<input type="text" value="230.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="980.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 22 / 93
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Jeanette Quilhot

Mailing Address 9464 S 700 E-92

City State Zip Code
Roanoke IN 46783-9245

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

Name of Employer Retired Occupation Retiree

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 9

Transaction ID: 5565A4F9CCFD4F933B9

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Larry Rastrelli

Mailing Address 13807 Crown Bluff

City State Zip Code
San Antonio TX 78216-1929

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

Name of Employer Self-Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 9

Transaction ID: 111009-568

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Marian L. Reardon

Mailing Address 2113 S Lynn Street

City State Zip Code
Arlington VA 22202-2129

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

Name of Employer Retired Occupation Investor/Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 9

Transaction ID: 0A36910E0518D15C6A5

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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: (check only one)	PAGE 23 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Vincent Schmitz	Date of Receipt MM / DD / YYYY 11 / 12 / 2009
	Mailing Address 4207 Montview Boulevard	Transaction ID: 1933EB7F7C8821AF56C
	City State Zip Code Denver CO 80207-3725	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Bank Occupation Banking Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Robert Seldin	Date of Receipt MM / DD / YYYY 10 / 19 / 2009
	Mailing Address 4889 Old Dominion Drive	Transaction ID: EC9F7B6ED409C214B7B
	City State Zip Code Arlington VA 22207-2744	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Archstone Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	

C.	Full Name (Last, First, Middle Initial) Erin Starr	Date of Receipt MM / DD / YYYY 10 / 31 / 2009
	Mailing Address 11350 Four Points Drive Apt. 1326	Transaction ID: 111009-694
	City State Zip Code Austin TX 78726-2201	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
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: (check only one)	PAGE 24 / 93
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) John D. Stewart	Date of Receipt MM / DD / YYYY 10 / 28 / 2009
	Mailing Address 3670 Northwood Drive	Transaction ID: 089471C1FF9337B6CC3
	City State Zip Code Memphis TN 38111-6140	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Grace - St. Luke's Episcopal School Occupation: Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

B.	Full Name (Last, First, Middle Initial) Mary Grace Sundry	Date of Receipt MM / DD / YYYY 10 / 23 / 2009
	Mailing Address 45 Fordyce Manor Court	Transaction ID: 53D82275B91B2769763
	City State Zip Code Lake Saint Louis MO 63367-1800	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: None Occupation: Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00	

C.	Full Name (Last, First, Middle Initial) Thomas Tarzian	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 1100 S High Street	Transaction ID: A2FD2B5DE615F85E754
	City State Zip Code Bloomington IN 47401-6108	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Sarkes Tarzian, Inc. Occupation: Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
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 25 / 93
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)
Steven Taylor

Mailing Address 515 Santa Paula Drive

City Salinas State CA Zip Code 93901-1517

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

Name of Employer Veritas Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 9

Transaction ID: 21E83AE311BC050A776

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
Steven Taylor

Mailing Address 515 Santa Paula Drive

City Salinas State CA Zip Code 93901-1517

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

Name of Employer Veritas Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Transaction ID: 758BFA13F95DD8703D6

Amount of Each Receipt this Period
2500.00

C.

Full Name (Last, First, Middle Initial)
Roger Tollefson

Mailing Address 41193 280th Avenue Southwest

City Crookston State MN Zip Code 56716-8716

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

Name of Employer Self-Employed Occupation Farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Transaction ID: 111009-385

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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 26 / 93
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)
Ruth Walker

Mailing Address 1220 Bennett Circle

City Alabaster State AL Zip Code 35007-9301

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

Name of Employer N/A Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 26 / 2009
Transaction ID: 111009-6
 Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
Margaret Welch

Mailing Address 1403 Cypress Street

City Crossett State AR Zip Code 71635-4021

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 20 / 2009
Transaction ID: 3D6757F34387F3C978D
 Amount of Each Receipt this Period: 400.00

C.

Full Name (Last, First, Middle Initial)
John Whitlock

Mailing Address 8720 River Road

City Richmond State VA Zip Code 23229-8307

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

Name of Employer The Whitlock Group Occupation President and CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 27 / 2009
Transaction ID: 5B25EEEEAF6CA42499B3
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
TOTAL This Period (last page this line number only)	▶	65642.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 93
	(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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial) Citizens United Political Victory Fund		Date of Receipt
Mailing Address 1006 Pennsylvania Ave SE		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: 56AD5AF2586656AC2EB
<input checked="" type="checkbox"/> C C00295527		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="5000.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Family Pac		Date of Receipt
Mailing Address 1001 Liberty Avenue Suite 850		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
City	State	Zip Code
Pittsburgh	PA	15222
FEC ID number of contributing federal political committee.		Transaction ID: 7DBCA1F79DF12EEBAFC
<input checked="" type="checkbox"/> C C00336842		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1000.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="6000.00"/>

**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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p>A. Full Name (Last, First, Middle Initial) Chain Bridge Bank</p> <p>Mailing Address 1445-A Laughlin Avenue</p> <p>City McLean State VA Zip Code 22101</p> <p>Purpose of Disbursement Bank Fees 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: M4ADFDE46D36A71906A1</p> <p>Date of Disbursement 11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing Fees 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: VEF42ADC511C0FED0158</p> <p>Date of Disbursement 11 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 94.04</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing Fees 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: VE366ED99683667A4071</p> <p>Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 10.47</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

354.51

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 29 / 93

<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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing 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: V9366D2E373BA0D1FBA2</p> <p>Date of Disbursement 11 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 0.16</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Intuit Discount Bankcard</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Processing 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: V678B5CCB46EFA372B5D</p> <p>Date of Disbursement 11 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 0.40</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kintera, Inc.</p> <p>Mailing Address DEPT AT 952208</p> <p>City Atlanta State GA Zip Code 31192-2208</p> <p>Purpose of Disbursement Kintera Internet FR 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: VDDEDDF06630E7B7DF4C</p> <p>Date of Disbursement 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 495.56</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

496.12

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 30 / 93

<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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)
Kintera, Inc.

Transaction ID: V0D68B055F4D298EB327

Date of Disbursement

Mailing Address DEPT AT 952208

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	1		1	0		2	0	0	9

City Atlanta State GA Zip Code 31192-2208

Amount of Each Disbursement this Period

1956.37

Purpose of Disbursement
Fees

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1956.37

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

2807.00

**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 31 / 93

<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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)
Doug Hoffman for Congress

Mailing Address 111 River Street

City State Zip Code
Saranac Lake NY 12983

Purpose of Disbursement
2009 General

Candidate Name
Douglas L. Hoffman

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 1BD62E745057ECE70E9

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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)

PAGE 32 / 93

<input 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 checked="" 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)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)
James and K. Theresa Doohar

Mailing Address 122 Orvilton Drive

City State Zip Code
Syracuse NY 13214-1615

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: AD2F4603E8E00432477

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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)

PAGE 33 / 93

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Bolling for Lt. Governor		Transaction ID: 8C56D08D9A9632277EC	
	Mailing Address 2819 N Parham Road		Date of Disbursement 11 / 02 / 2009	
	City Richmond	State VA	Zip Code 23294	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Nonfederal Contribution		011	
	Candidate Name		Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Andy Blom

Mailing Address
101 Asbury Court

City Winchester	State VA	Zip Code 22602
--------------------	-------------	-------------------

Purpose of Expenditure Room and Board	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Amount
1092.50

Transaction ID: V2EDE62BC3DC95447CEB

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Andy Blom

Mailing Address
101 Asbury Court

City Winchester	State VA	Zip Code 22602
--------------------	-------------	-------------------

Purpose of Expenditure Independent Contract- or Wages	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Amount
1500.00

Transaction ID: V967306AA0FD881A7EC8

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	2592.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Georgia Blom

Mailing Address
101 Asbury Court

City State Zip Code
Winchester VA 22602

Purpose of Expenditure Category/Type
Room and Board

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought **107389.15**

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Amount
712.50

Transaction ID: VC677CD2EC320663163A

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Georgia Blom

Mailing Address
101 Asbury Court

City State Zip Code
Winchester VA 22602

Purpose of Expenditure Category/Type
Independent Contract- or Wages

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought **107389.15**

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Amount
1500.00

Transaction ID: V7FB7EAC84176A5E14CB

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	2212.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mallory Quigley

Mailing Address
20412 Sawgrass Drive

City State Zip Code
Montgomery Village MD 20886

Purpose of Expenditure Category/Type
Room and Board

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Amount
675.00

Transaction ID: VAFA34C114E74236D681

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Mallory Quigley

Mailing Address
20412 Sawgrass Drive

City State Zip Code
Montgomery Village MD 20886

Purpose of Expenditure Category/Type
Independent Contract- or Wages

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Amount
750.00

Transaction ID: VB4F70E449E821148A55

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	1425.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Natalie Brown

Mailing Address
1727 N. Rhodes St. #232

City Arlington	State VA	Zip Code 22201
-------------------	-------------	-------------------

Purpose of Expenditure Room and Board	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Amount
675.00

Transaction ID: V0F11840C5672F419886

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Natalie Brown

Mailing Address
1727 N. Rhodes St. #232

City Arlington	State VA	Zip Code 22201
-------------------	-------------	-------------------

Purpose of Expenditure Independent Contract- or Wages	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Amount
750.00

Transaction ID: V8B989BF437D62F52492

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	1425.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Nicholas Bell

Mailing Address
8062 Ordinary Way

City Annandale	State VA	Zip Code 22003
-------------------	-------------	-------------------

Purpose of Expenditure Independent Contract- or Wages	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Amount

750.00

Transaction ID: VDA2CF4DF07019DFD998

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

Full Name (Last, First, Middle, Initial) of Payee
Nicholas Bell

Mailing Address
8062 Ordinary Way

City Annandale	State VA	Zip Code 22003
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Purpose of Expenditure Room and Board	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Amount

1092.50

Transaction ID: V463CB989A6531B1A93F

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

(a) SUBTOTAL of Itemized Independent Expenditures	1842.50
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Georgia Blom

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 9

Mailing Address
101 Asbury Court

Amount
190.62

City State Zip Code
Winchester VA 22602

Transaction ID: V5A3C9DF8629536A2EDC

Purpose of Expenditure
Reimbursement - Gas, Office Supplies, Storage
Category/Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Nicholas Bell

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 9

Mailing Address
8062 Ordinary Way

Amount
71.04

City State Zip Code
Annandale VA 22003

Transaction ID: V9EA66C3C076ECD8B8E6

Purpose of Expenditure
Reimbursement - Gas, Storage
Category/Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	261.66
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Neylan and Partners

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 9

Mailing Address
9401 Brookmay Court

Amount
30162.60

City State Zip Code
Alexandria VA 22309

Transaction ID: V623D8F3DF7C54EB8803

Purpose of Expenditure Category/Type
Radio Ads

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
The Printing Express

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 9

Mailing Address
1832 S Main Street

Amount
1286.08

City State Zip Code
Harrisburg PA 22801

Transaction ID: V05F6D7E723AF273B62C

Purpose of Expenditure Category/Type
Literature

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	31448.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Natalie Brown

Mailing Address
1727 N. Rhodes St. #232

City Arlington	State VA	Zip Code 22201
Purpose of Expenditure Reimbursement - Food		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 9

Amount
87.36

Transaction ID: V83676018DC2EE672997

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Walsh Storage

Mailing Address
50 Burney Avenue

City Massena	State NY	Zip Code 13662
Purpose of Expenditure Storage		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 9

Amount
30.00

Transaction ID: V7727994CC68DDAD34D7

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	117.36
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Staples

Mailing Address
77 Consumer Square

City Plattsburgh	State NY	Zip Code 12901
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Purpose of Expenditure Paper, pens, posterboard, post-its	Category/Type
--	---------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Amount
28.36

Transaction ID: V6D6842B5A84BCDA9D21

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Borders

Mailing Address
60 Smithfield Blvd
Suite 103

City Plattsburgh	State NY	Zip Code 12901
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Purpose of Expenditure Office Supplies	Category/Type
---	---------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Amount
6.43

Transaction ID: VFD872700678C786CCB4

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	34.79
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Staples

Mailing Address
1283 Arsenal Street

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Office Supplies	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Amount
117.38

Transaction ID: V2A61127D2F0780F3B8F

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Wal-Mart

Mailing Address
43 Stephenville Street

City Massena	State NY	Zip Code 13662
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Purpose of Expenditure Office Supplies	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Amount
20.07

Transaction ID: VE936D35E8DB919ACEE9

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	137.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Sharlow's Gas Station

Mailing Address
11970 Route 37

City Waddington	State NY	Zip Code 13694
Purpose of Expenditure Gas		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Amount
23.00

Transaction ID: V4E802B6AFA626B1E3C8

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
North Country This Week

Mailing Address
PO Box 975

City Potsdam	State NY	Zip Code 13676
Purpose of Expenditure Advertisement		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Amount
57.00

Transaction ID: V643F43C30E68D48A7A3

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	80.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Sunshine Mini-Mart

Mailing Address
3323 Maple Avenue

City State Zip Code
Pulaski NY 13142

Purpose of Expenditure Category/Type
Gas

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
MM / DD / YYYY
10 / 24 / 2009

Amount
41.19

Transaction ID: V96FD5120C4606B564B1

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
RPM Mini Mart

Mailing Address
2184 State Highway 420

City State Zip Code
Massena NY 13662

Purpose of Expenditure Category/Type
Gas

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
MM / DD / YYYY
10 / 24 / 2009

Amount
16.43

Transaction ID: V7C381A2B372C527CEC6

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	57.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date MM / DD / YYYY
12 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Sunoco

Mailing Address
101 Fayette Street

City Manlius	State NY	Zip Code 13104
-----------------	-------------	-------------------

Purpose of Expenditure Gas	Category/ Type
-------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Amount
28.67

Transaction ID: V74591694B4F4150E7C4

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

Full Name (Last, First, Middle, Initial) of Payee
Rite Aid

Mailing Address
1222 Arsenal Street

City Watertown	State NY	Zip Code 13601
-------------------	-------------	-------------------

Purpose of Expenditure Volunteer Expenses (Food)	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 9

Amount
30.13

Transaction ID: V2E84509C80A01805151

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

(a) SUBTOTAL of Itemized Independent Expenditures	58.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Pricechopper

Mailing Address
1282 Arsenal Street

City State Zip Code
Watertown NY 13601

Purpose of Expenditure
Volunteer Expense (F-ood) Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought **107389.15**

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 9

Amount
44.94

Transaction ID: V7BA6AEB737989D09F46

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Ruby Tuesday

Mailing Address
1290 Arsenal Street

City State Zip Code
Watertown NY 13601

Purpose of Expenditure
Volunteer Expense (F-ood) Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought **107389.15**

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 9

Amount
243.99

Transaction ID: V98A38EEC04B67812F1D

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	288.93
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dunkin Donuts

Mailing Address
1250 Arsenal Street

City State Zip Code
Watertown NY 13601

Purpose of Expenditure Category/Type
Volunteer Expenses (Food)

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought

Date
MM / DD / YYYY
10 / 26 / 2009

Amount

Transaction ID: VDAD9D948751E3E03C8B

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Staples

Mailing Address
77 Consumer Square

City State Zip Code
Plattsburgh NY 12901

Purpose of Expenditure Category/Type
Office Supplies

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought

Date
MM / DD / YYYY
10 / 26 / 2009

Amount

Transaction ID: V7F51F815CB68175DADC

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="104.65"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date MM / DD / YYYY
12 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Neylan and Partners

Mailing Address
9401 Brookmay Court

City Alexandria	State VA	Zip Code 22309
--------------------	-------------	-------------------

Purpose of Expenditure Media Buy	Category/ Type
-------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 9

Amount
10205.00

Transaction ID: V28458D1E738123B39E2

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Arts Jug

Mailing Address
820 Huntington Street

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Volunteer Expenses (Food)	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 9

Amount
226.29

Transaction ID: V0194054C288F530C58A

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	10431.29
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Crystal Restaurant

Mailing Address
87 Public Square

City State Zip Code
Watertown NY 13601

Purpose of Expenditure Category/Type
Volunteer Breakfast

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Amount

Transaction ID: VD4B21C20440F085ED6F

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Tillman's Gas

Mailing Address
36366 State Route 37

City State Zip Code
Theresa NY 13691

Purpose of Expenditure Category/Type
Gas

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Amount

Transaction ID: V58D58B3C1F978B4C24D

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="51.40"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Wiland Direct

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Mailing Address
2950 Colorful Avenue
Suite 100

Amount
1980.07

City State Zip Code
Longmont CO 80504

Transaction ID: V5771EB6B2EE41D1A16C

Purpose of Expenditure
List Rental

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Staples

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 9

Mailing Address
1283 Arsenal Street

Amount
71.64

City State Zip Code
Watertown NY 13601

Transaction ID: V17F4E1BD1E656872F13

Purpose of Expenditure
Office Supplies

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	2051.71
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Bazzanos Pizza

Mailing Address
5041 S. Catherine Street

City Plattsburgh	State NY	Zip Code 12901
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Purpose of Expenditure Food for Volunteers	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 9

Amount
49.75

Transaction ID: V3ADD74DC6FAFE487E77

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Staples

Mailing Address
77 Consumer Square

City Plattsburgh	State NY	Zip Code 12901
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Purpose of Expenditure Office Supplies	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 9

Amount
73.38

Transaction ID: VC9A4B9ACEE9A88CDA4

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	123.13
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Neylan and Partners

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 9

Mailing Address
9401 Brookmay Court

Amount
12000.00

City State Zip Code
Alexandria VA 22309

Transaction ID: VF3C77D70304F775EFAF

Purpose of Expenditure Category/Type
Media Buy

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
The Printing Express

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 9

Mailing Address
1832 S Main Street

Amount
8221.21

City State Zip Code
Harrisburg PA 22801

Transaction ID: VC616DBEC4590EE14A08

Purpose of Expenditure Category/Type
Literature

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	20221.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Kunnect

Mailing Address
220 Newport Center Dr #11-142

City Newport Beach	State CA	Zip Code 92660
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Purpose of Expenditure Telephone Calls	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M M 1 0	D D 2 8	Y Y Y Y 2 0 0 9
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Amount

1071.75

Transaction ID: VE5F60EC16AFCC898731

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

Full Name (Last, First, Middle, Initial) of Payee
Staples

Mailing Address
1283 Arsenal Street

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Office Supplies	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date

M M 1 0	D D 2 9	Y Y Y Y 2 0 0 9
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Amount

60.33

Transaction ID: V78C5A972E8F331DB497

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

(a) SUBTOTAL of Itemized Independent Expenditures	1132.08
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date

M M 1 2	D D 0 3	Y Y Y Y 2 0 0 9
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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The Printing Express

Mailing Address
1832 S Main Street

City Harrisburg	State PA	Zip Code 22801
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Purpose of Expenditure Literature	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Amount
1944.88

Transaction ID: V730C04DD1D24AFEE945

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
LaQuinta Inn

Mailing Address
16 Plaza Boulevard

City Plattsburgh	State NY	Zip Code 12901
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Purpose of Expenditure Lodging	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Amount
209.79

Transaction ID: V814F731D5305FD702AC

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	2154.67
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
James Bell

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Mailing Address
8062 Ordinary Way

Amount
140.00

City State Zip Code
Annandale VA 22003

Transaction ID: V2DE2AECC4611C65220D

Purpose of Expenditure
Meals

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Crystal Restaurant

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Mailing Address
87 Public Square

Amount
31.02

City State Zip Code
Watertown NY 13601

Transaction ID: V4F8CE1A5758D17D406E

Purpose of Expenditure
Meal

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	171.02
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Wal-Mart Stores, Inc.

Mailing Address
20823 State Route 3

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Office Supplies	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Amount
16.16

Transaction ID: VD323294843A66AA03D3

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Jordan Miller

Mailing Address
7 Deer Track Lane

City Newark	State DE	Zip Code 19711
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Purpose of Expenditure Hotel & Meal Stipend	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
172.50

Transaction ID: V3B5B06F07EAD787F1FE

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	188.66
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Jordan Miller

Mailing Address
7 Deer Track Lane

City Newark	State DE	Zip Code 19711
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Purpose of Expenditure Travel Expenses	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
157.23

Transaction ID: V5F44152631E2C6C8AAB

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Jordan Miller

Mailing Address
7 Deer Track Lane

City Newark	State DE	Zip Code 19711
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Purpose of Expenditure Office Supplies	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
45.60

Transaction ID: VF2EEEE9436D27AB05C1

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	202.83
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Emmett McGroarty

Mailing Address
4404 East-West Hwy

City	State	Zip Code
Bethesda	MD	20814

Purpose of Expenditure Office Supplies	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		3 1		2 0 0 9

Amount

13.23

Transaction ID: V70DFDFE3B9413CFD31F

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

Full Name (Last, First, Middle, Initial) of Payee
Emmett McGroarty

Mailing Address
4404 East-West Hwy

City	State	Zip Code
Bethesda	MD	20814

Purpose of Expenditure Salary	Category/ Type
----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		3 1		2 0 0 9

Amount

400.00

Transaction ID: V55222A202E621556DFD

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

(a) SUBTOTAL of Itemized Independent Expenditures	413.23
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 3		2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Pricechopper

Mailing Address
1282 Arsenal Street

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Food for Volunteers	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
384.02

Transaction ID: V681BDE87F7BD3362B69

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Rite Aid

Mailing Address
1222 Arsenal Street

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Food for Volunteers	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
35.51

Transaction ID: V5F949C8F951EA59C130

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	419.53
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Comfort Suites

Mailing Address
5875 Carmenica Drive

City State Zip Code
Cicero NY 13039

Purpose of Expenditure Category/Type
Rally Food

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
400.00

Transaction ID: VD871D8D8DFA7EBC259B

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Wal-Mart Stores, Inc.

Mailing Address
25 Consumer Square

City State Zip Code
Plattsburgh NY 12901

Purpose of Expenditure Category/Type
Office Supplies

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
38.82

Transaction ID: VC04FD36367CAC9005AC

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	438.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Valero

Mailing Address
1111 Champlain Street

City State Zip Code
Ogdensburg NY 13669

Purpose of Expenditure Category/Type
Gas

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
36.10

Transaction ID: VDBC6B041E9710D2BA91

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Emmett McGroarty

Mailing Address
4404 East-West Hwy

City State Zip Code
Bethesda MD 20814

Purpose of Expenditure Category/Type
Hotel and Meal Stipend

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
218.81

Transaction ID: V4589AA6FC9290BA8081

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	254.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Emmett McGroarty

Mailing Address
4404 East-West Hwy

City State Zip Code
Bethesda MD 20814

Purpose of Expenditure Category/
Travel Expenses Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought
107389.15

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
121.87

Transaction ID: VD65F9B0856C43457677

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Kunnect

Mailing Address
220 Newport Center Dr #11-142

City State Zip Code
Newport Beach CA 92660

Purpose of Expenditure Category/
GOTV Calls Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought
107389.15

Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Amount
5992.00

Transaction ID: VD56D07EB62A698B8903

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	6113.87
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Paul Bothwell

Mailing Address
606 S. Taylor Street

City State Zip Code
Arlington VA 22204

Purpose of Expenditure Category/Type
Meal and Hotel Stipend

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought
107389.15

Date
MM / DD / YYYY
10 / 31 / 2009

Amount
120.00

Transaction ID: V195EE812D42E7CCA7A

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Comfort Suites

Mailing Address
5875 Carmenica Drive

City State Zip Code
Cicero NY 13039

Purpose of Expenditure Category/Type
Lodging for Volunteers

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought
107389.15

Date
MM / DD / YYYY
10 / 31 / 2009

Amount
4248.80

Transaction ID: V7A0A304BFEFEC53296C

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	4368.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date
MM / DD / YYYY
12 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Exxon Mobil

Mailing Address
262 Arsenal Street

City Watertown	State NY	Zip Code 13601-2504
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Purpose of Expenditure Gas for NY-23	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 9

Amount
55.68

Transaction ID: V9EBBF6DE087BB9E736B

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Rebecca Herr

Mailing Address
1727 N Rhodes #232

City Arlington	State VA	Zip Code 22201
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Purpose of Expenditure Volunteer Expense	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 9

Amount
125.00

Transaction ID: V9BB9996BD07F57C1608

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	180.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Ryan Haber

Mailing Address
Information Requested

City Information Reques	State VA	Zip Code 00000
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 9

Amount
125.00

Transaction ID: VD1299B5FB717B4B243A

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Ryan Stacey

Mailing Address
7 Sonya Way

City Plattsburgh	State NY	Zip Code 12901
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 9

Amount
40.00

Transaction ID: V6178681CAF3FFD56721

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	165.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Emily Buchanan

Mailing Address
3203 Ravensworth Place

City Alexandria	State VA	Zip Code 22302
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Purpose of Expenditure Reimbursement for Office Supplies	Category/Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
--	-----------

Date
MM / DD / YYYY
11 / 02 / 2009

Amount
15.00

Transaction ID: V2DAAC3CDB5CB3AAC4CD

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Subway

Mailing Address
Information Requested

City Information Reques	State VA	Zip Code 00000
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Purpose of Expenditure Volunteer Lunch	Category/Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
--	-----------

Date
MM / DD / YYYY
11 / 02 / 2009

Amount
134.96

Transaction ID: VC6FA94E30A7E1D40100

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	149.96
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date MM / DD / YYYY
12 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Anthony Ford

Mailing Address
11 Kingfisher Way

City	State	Zip Code
Waterford	CT	06385

Purpose of Expenditure Volunteer Worker	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 9

Amount
75.00

Transaction ID: V1AF72A964D5A3AB2888

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Gerald Flynn

Mailing Address
171 Tallman Rd

City	State	Zip Code
Ogdensburg	NY	13669

Purpose of Expenditure Volunteer worker	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
48.00

Transaction ID: V658D1212B19C75C62E4

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	123.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Robert Willard

Mailing Address
1991 State Highway 184

City	State	Zip Code
Heuvelton	NY	13654

Purpose of Expenditure Volunteer Worker	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
48.00

Transaction ID: V940EA4D74178E7F6BD0

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Jodi Flanagan

Mailing Address
5184 County Rte 27

City	State	Zip Code
Canton	NY	13617

Purpose of Expenditure Volunteer Worker	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
48.00

Transaction ID: V907C850A13C015B6D66

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	96.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Cassandra Griffen

Mailing Address
1700 County Rte 25 Lot 22

City Canton	State NY	Zip Code 13617
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
48.00

Transaction ID: VA909357648706E127B6

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Dakota Sharp

Mailing Address
617 CR 24

City Colton	State NY	Zip Code 13625
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
48.00

Transaction ID: V1564390AB8ADB82C6A2

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	96.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Francesca Centofanti

Mailing Address
413 River Rd

City Potsdam	State NY	Zip Code 13676-3105
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
48.00

Transaction ID: VAB8FAA1FCD59F63DD51

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Josh Mousaw

Mailing Address
64 Riverside Dr

City Canton	State NY	Zip Code 13617
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
48.00

Transaction ID: V7CB9E93471C33AF4818

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	96.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Josh Mousaw

Mailing Address
64 Riverside Dr

City State Zip Code
Canton NY 13617

Purpose of Expenditure Category/Type
Gas Reimbursement

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
MM / DD / YYYY
11 / 03 / 2009

Amount
8.00

Transaction ID: VF14F2D22D42877AB87E

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Eric Mende

Mailing Address
15 Harrison St

City State Zip Code
Canton NY 13617

Purpose of Expenditure Category/Type
Volunteer Worker

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
MM / DD / YYYY
11 / 03 / 2009

Amount
48.00

Transaction ID: V232446CE2E09A85EDEC

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	56.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date MM / DD / YYYY
12 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Jim Ross

Mailing Address
980 Union Mills Rd

City State Zip Code
Broadalbin NY 12025

Purpose of Expenditure Category/Type
Volunteer Worker

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
MM / DD / YYYY
11 / 03 / 2009

Amount
40.00

Transaction ID: V89027F95817F5877953

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Paul Sikora

Mailing Address
P.O. Box 6404

City State Zip Code
Potsdam NY 13699-6404

Purpose of Expenditure Category/Type
Volunteer Worker

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
MM / DD / YYYY
11 / 03 / 2009

Amount
40.00

Transaction ID: V771ECCFEBBC55CADCE2

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	80.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date MM / DD / YYYY
12 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Paul Sikora

Mailing Address
P.O. Box 6404

City Potsdam	State NY	Zip Code 13699-6404
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Purpose of Expenditure Gas Reimbursement	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
8.00

Transaction ID: V449F95E6DC014812D57

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Josh Caprood

Mailing Address
303 Ridge Street

City Glen Falls	State NY	Zip Code 12801
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
24.00

Transaction ID: VB5780A2DC9600784FBC

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	32.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Matthew Flynn II

Mailing Address
343 CR 35

City State Zip Code
Canton NY 13617

Purpose of Expenditure Category/Type
Gas Reimbursement

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
75.27

Transaction ID: V1AD8510C5C39D7BFBE

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Matthew Flynn II

Mailing Address
343 CR 35

City State Zip Code
Canton NY 13617

Purpose of Expenditure Category/Type
Reimbursements for Supplies

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought 107389.15

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
25.99

Transaction ID: V1F7EC58866E6FACBA8D

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	101.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER ▼ C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Matthew Flynn II

Mailing Address
343 CR 35

City Canton	State NY	Zip Code 13617
Purpose of Expenditure Reimbursements for Food for Volunteers		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
--	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
53.90

Transaction ID: VDBEFC8CE873F3BEA5FB

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Natalie Brown

Mailing Address
1727 N. Rhodes St. #232

City Arlington	State VA	Zip Code 22201
Purpose of Expenditure Reimbursement for Mileage		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
--	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
456.42

Transaction ID: VD1D347AA61F9873B4A9

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	510.32
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Nicholas Bell

Mailing Address
8062 Ordinary Way

City Annandale	State VA	Zip Code 22003
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Purpose of Expenditure Gas Reimbursement	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
22.65

Transaction ID: VDCE6C5E1855E96F6AE7

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Nicholas Bell

Mailing Address
8062 Ordinary Way

City Annandale	State VA	Zip Code 22003
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Purpose of Expenditure Storage Reimbursement	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
80.00

Transaction ID: VF8A5EEA793CC1832CA3

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	102.65
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Nicholas Bell

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Mailing Address
8062 Ordinary Way

Amount
52.00

City State Zip Code
Annandale VA 22003

Transaction ID: V677EFEECDDDC7C1F9AB

Purpose of Expenditure Category/Type
Advertisement Reimb.

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Nicholas Bell

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Mailing Address
8062 Ordinary Way

Amount
39.43

City State Zip Code
Annandale VA 22003

Transaction ID: VF3F698143DF2A5D7066

Purpose of Expenditure Category/Type
Supplies Reimburse-
ment

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	91.43
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:100%;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width:100%;" type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Rebecca Herr

Mailing Address
1727 N Rhodes #232

City Arlington	State VA	Zip Code 22201
Purpose of Expenditure Gas Reimbursement		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
199.60

Transaction ID: V1D33401178A7D475DB4

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Rebecca Herr

Mailing Address
1727 N Rhodes #232

City Arlington	State VA	Zip Code 22201
Purpose of Expenditure Tolls Reimbursement		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
30.35

Transaction ID: V8FCF7E15D6AD524FA83

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	229.95
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Rebecca Herr

Mailing Address
1727 N Rhodes #232

City Arlington	State VA	Zip Code 22201
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Purpose of Expenditure Reimbursement--Rental Car	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
--	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
432.11

Transaction ID: V82ABFF58919A778758E

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Angela Aronoff

Mailing Address
1500 Massachusetts Ave NW
Apt 615

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
--	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
80.00

Transaction ID: V4D42F20758434CE435B

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	512.11
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Trevor Leach

Mailing Address
1244 Foxboro Lane

City Endicott	State NY	Zip Code 13760
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
80.00

Transaction ID: V87FCF38113D0170D9E0

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Kevin Walz

Mailing Address
946 Cafferty Hill Rd

City Endicott	State NY	Zip Code 13760
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Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
80.00

Transaction ID: VEC5A5950CBC6DCC2A11

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	160.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER ▼ C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Timothy Shoemaker

Mailing Address
1521 Thompson Lane

City Mechanicsburg	State PA	Zip Code 17055
Purpose of Expenditure Volunteer Worker		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 1		0 3		2 0 0 9

Amount
80.00

Transaction ID: V20186605960BDD41469

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

Full Name (Last, First, Middle, Initial) of Payee
Rachel Kania

Mailing Address
701 S 25th Street

City Arlington	State VA	Zip Code 22202
Purpose of Expenditure Volunteer Worker		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 1		0 3		2 0 0 9

Amount
80.00

Transaction ID: V6410A123D7CE129A622

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

(a) SUBTOTAL of Itemized Independent Expenditures	160.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 3		2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Nick Leavens

Mailing Address
701 25th St S

City	State	Zip Code
Arlington	VA	22202

Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 1		0 3		2 0 0 9

Amount

80.00

Transaction ID: VE00885FA4C76CC054FE

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

Full Name (Last, First, Middle, Initial) of Payee
Matthew Flynn

Mailing Address
1124 Washington Street

City	State	Zip Code
Ogdensburg	NY	13669

Purpose of Expenditure Volunteer Worker	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 1		0 3		2 0 0 9

Amount

48.00

Transaction ID: VD883E3E1B688857EEC4

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2009

(a) SUBTOTAL of Itemized Independent Expenditures	128.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 3		2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mark Berg

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Mailing Address
317 Greenfield Avenue

Amount
750.00

City State Zip Code
Winchester VA 22602

Transaction ID: VD55E16A7C699CF6F53E

Purpose of Expenditure Category/Type
Volunteer Work

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Mark Berg

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Mailing Address
317 Greenfield Avenue

Amount
605.00

City State Zip Code
Winchester VA 22602

Transaction ID: V2179CCAAE6E4FC125B2

Purpose of Expenditure Category/Type
Meal & Hotel Stipend

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	1355.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mark Berg

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Mailing Address
317 Greenfield Avenue

Amount
326.82

City State Zip Code
Winchester VA 22602

Transaction ID: V04D5FD1CFA32DAF6995

Purpose of Expenditure
Reimbursement for Ga-
s/Supplies

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Aimee Flynn

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Mailing Address
1124 Washington St

Amount
48.00

City State Zip Code
Ogdensburg NY 13669

Transaction ID: V47A5740786F16F5877E

Purpose of Expenditure
2009 General

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	374.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Exxon Mobil

Mailing Address
262 Arsenal Street

City Watertown	State NY	Zip Code 13601-2504
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Purpose of Expenditure Gas	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
46.96

Transaction ID: VBB1D6893B06D88C411D

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Ruby Tuesday

Mailing Address
1290 Arsenal Street

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Volunteer Lunch	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
208.58

Transaction ID: V16F24F86F2291E93F80

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	255.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Sunoco

Mailing Address
101 Fayette Street

City Manlius	State NY	Zip Code 13104
Purpose of Expenditure Gas		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
24.63

Transaction ID: VBCB21E84F7142297098

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
New York T/W Auth

Mailing Address
4 Executive Blvd

City Suffern	State NY	Zip Code 10901-8212
Purpose of Expenditure Toll Expense		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
35.34

Transaction ID: VACEA6C7829620254842

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	59.97
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND		FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Enterprise Rent A Car

Mailing Address
18973 US RTE 11

City Watertown	State NY	Zip Code 13601-5654
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Purpose of Expenditure Rental Car	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
279.15

Transaction ID: VD893AE5CB43C116CA0D

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
LaQuinta Inn

Mailing Address
16 Plaza Boulevard

City Plattsburgh	State NY	Zip Code 12901
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Purpose of Expenditure Hotel	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
273.06

Transaction ID: VF227A5463BC2EE88B6D

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	552.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
LaQuinta Inn

Mailing Address
16 Plaza Boulevard

City Plattsburgh	State NY	Zip Code 12901
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Purpose of Expenditure Hotel	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
91.02

Transaction ID: VDC1BD9610DA88D39765

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Days Inn

Mailing Address
110 Commerce Park Drive

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Hotel	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
83.07

Transaction ID: VCCBE122EB9E92181222

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	174.09
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
JRW Auto Rental

Mailing Address
19079 US Rte 11

City Watertown	State NY	Zip Code 13601
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Purpose of Expenditure Rental Car	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
1342.13

Transaction ID: V7746B33E4086AFD415D

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Kwik Fill

Mailing Address
Information Requested

City Information Reques	State VA	Zip Code 00000
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Purpose of Expenditure Gas	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
33.94

Transaction ID: VE71407FFE1D0183B007

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	1376.07
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The Printing Express

Mailing Address
1832 S Main Street

City Harrisburg	State PA	Zip Code 22801
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Purpose of Expenditure Hoffman Postcard	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
1350.18

Transaction ID: V9938C7492967980BD05

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Kunnect

Mailing Address
220 Newport Center Dr #11-142

City Newport Beach	State CA	Zip Code 92660
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Purpose of Expenditure Calls	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Calendar Year-To-Date Per Election for Office Sought	107389.15
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Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Amount
7065.45

Transaction ID: V946C3705423AA045438

Office Sought: House State: NY
 Senate District: 23
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	8415.63
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND	FEC IDENTIFICATION NUMBER C C00332296
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MDS Communications Corporation

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Mailing Address
545 W Juanita Avenue

Amount
432.11

City State Zip Code
Mesa AZ 85210

Transaction ID: V3348BCC73A37CB0F493

Purpose of Expenditure
Telemarketing

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

Full Name (Last, First, Middle, Initial) of Payee
Nicholas Bell

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Mailing Address
8062 Ordinary Way

Amount
470.00

City State Zip Code
Annandale VA 22003

Transaction ID: V2CC57B4F024E2213F3B

Purpose of Expenditure
Phone Charges

Category/
Type

Office Sought: House State: NY
 Senate District: 23
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Douglas L. Hoffman

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 107389.15

Disbursement For: Primary General
 Other (specify) : _____
2009

(a) SUBTOTAL of Itemized Independent Expenditures	902.11
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Frank Cannon
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUSAN B ANTHONY LIST INC. CANDIDATE FUND		FEC IDENTIFICATION NUMBER C C00332296	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Andy Blom		Date M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 9	
Mailing Address 101 Asbury Court		Amount 28.75	
City State Zip Code Winchester VA 22602		Transaction ID: V9EDEAC3245C04086CA7	
Purpose of Expenditure Reimbursement for Local/Long Distance Calls		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Douglas L. Hoffman		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 107389.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2009	

(a) SUBTOTAL of Itemized Independent Expenditures	28.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	107389.15
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Frank Cannon Signature	Date M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 9