

**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

Democratic Properties Corporation-Federal

ADDRESS (number and street)

430 South Capitol Street, SE

☐Check if different
than previously
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00384479

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

02

01

2010

through

02

28

2010

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

Andrew Tobias

Signature of Treasurer

Electronically Filed by Andrew Tobias

Date

03

18

2010

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)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 22

Write or Type Committee Name
Democratic Properties Corporation-Federal

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>Y Y Y Y 2010</div>		364819.84
(b) Cash on Hand at Beginning of Reporting Period	314156.87	
(c) Total Receipts (from Line 19)	169969.50	237573.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	484126.37	602393.34
7. Total Disbursements (from Line 31)	172884.74	291151.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	311241.63	311241.63
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Democratic Properties Corporation-Federal

Report Covering the Period:

From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	169969.50	233423.50
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	4150.00
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))	169969.50	237573.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	169969.50	237573.50

DETAILED SUMMARY PAGE

of Disbursements

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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.....	164624.46	282891.43	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	164624.46	282891.43	
22. Transfers to Affiliated/Other Party Committees.....	8260.28	8260.28	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	172884.74	291151.71	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	172884.74	291151.71	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	164624.46	282891.43
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	4150.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	164624.46	278741.43

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

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

FOR LINE NUMBER: PAGE 6 / 22

(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

169969.50

Date of Receipt

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

Transaction ID: SA12-3033

Amount of Each Receipt this Period

105309.00

Property Lease

B.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

169969.50

Date of Receipt

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

Transaction ID: SA12-3031

Amount of Each Receipt this Period

6003.00

Property Lease

C.

Full Name (Last, First, Middle Initial)
DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

169969.50

Date of Receipt

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

Transaction ID: SA12-3032

Amount of Each Receipt this Period

52654.50

Property Lease

SUBTOTAL of Receipts This Page (optional)

163966.50

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 22

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

169969.50

Date of Receipt

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

Transaction ID: SA12-3034

Amount of Each Receipt this Period

6003.00

Property Lease

SUBTOTAL of Receipts This Page (optional)

6003.00

TOTAL This Period (last page this line number only)

169969.50

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 8 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address P.O. BOX 1232

City
CHARLOTTE

State
NC

Zip Code
28201-1232

Purpose of Disbursement

Bank Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3035

Date of Disbursement

/ /

Amount of Each Disbursement this Period

149.18

B.

Full Name (Last, First, Middle Initial)

Guardian

Mailing Address PO Box 95101

City
Chicago

State
IL

Zip Code
60694-5101

Purpose of Disbursement

Healthcare Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2989

Date of Disbursement

/ /

Amount of Each Disbursement this Period

132.42

C.

Full Name (Last, First, Middle Initial)

Carefirst Bluecross Blueshield

Mailing Address PO Box 79749

City
Baltimore

State
MD

Zip Code
21279

Purpose of Disbursement

Healthcare Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2990

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2089.58

SUBTOTAL of Disbursements This Page (optional)

2371.18

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 PageFOR LINE NUMBER:
(check only one)

PAGE 9 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

Guardian

Mailing Address PO Box 95101

City
ChicagoState
ILZip Code
60694-5101Purpose of Disbursement
Healthcare Insurance

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2991

Date of Disbursement

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

Amount of Each Disbursement this Period

132.42

B.

Full Name (Last, First, Middle Initial)

DTM COPORATION

Mailing Address 1320 FENWICK LANE STE 700

City
SILVER SPRINGState
MDZip Code
20910Purpose of Disbursement
Security

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2992

Date of Disbursement

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

Amount of Each Disbursement this Period

12637.68

C.

Full Name (Last, First, Middle Initial)

DTM COPORATION

Mailing Address 1320 FENWICK LANE STE 700

City
SILVER SPRINGState
MDZip Code
20910Purpose of Disbursement
Security

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2993

Date of Disbursement

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

Amount of Each Disbursement this Period

13324.24

SUBTOTAL of Disbursements This Page (optional)

26094.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

DTM COPORATION

Mailing Address 1320 FENWICK LANE STE 700

City State Zip Code
SILVER SPRING MD 20910

Purpose of Disbursement
Security

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-2994

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12722.40

B.

Full Name (Last, First, Middle Initial)

WASTE MANAGEMENT OF MD

Mailing Address PO BOX 13648

City State Zip Code
PHILADELPHIA PA 19101-3648

Purpose of Disbursement
Bulk Trash Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-2995

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1914.24

C.

Full Name (Last, First, Middle Initial)

WORLD RECYCLING COMPANY

Mailing Address 5600 COLUMBIA PARK ROAD

City State Zip Code
CHEVERLY MD 20785

Purpose of Disbursement
Recycle Removal

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-2996

Date of Disbursement

/ /

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)

15236.64

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 11 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

WESTERN PEST SERVICES

Mailing Address 202 PERRY PKWY

City
GAITHERSBURG

State
MD

Zip Code
20877

Purpose of Disbursement
Exterminating maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2997

Date of Disbursement

/ /

Amount of Each Disbursement this Period

388.49

B.

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City
DENVER

State
CO

Zip Code
80239

Purpose of Disbursement
Engineer/Architect Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2998

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10428.60

C.

Full Name (Last, First, Middle Initial)

Staples Business Advantage Dept. DC

Mailing Address PO Box 415256

City
Boston

State
MA

Zip Code
02241-5256

Purpose of Disbursement
Office Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-2999

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.06

SUBTOTAL of Disbursements This Page (optional)

10917.15

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City
CHICAGO

State
IL

Zip Code
60673-3050

Purpose of Disbursement
Elevator Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3000

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2431.27

B.

Full Name (Last, First, Middle Initial)

Rasevic Snow Service

Mailing Address 5200 River Rd.

City
Bethesda

State
MD

Zip Code
20816

Purpose of Disbursement
Landscaping Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3001

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2591.70

C.

Full Name (Last, First, Middle Initial)

Rasevic Snow Service

Mailing Address 5200 River Rd.

City
Bethesda

State
MD

Zip Code
20816

Purpose of Disbursement
Landscaping Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3002

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1727.80

SUBTOTAL of Disbursements This Page (optional)

6750.77

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Plant Works</p> <p>Mailing Address 14504 Lee Road Unit E</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Landscaping Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-3003</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>90.10</div> </div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Plant Works</p> <p>Mailing Address 14504 Lee Road Unit E</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Landscaping Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-3004</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>81.62</div> </div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Pepco Energy Service Inc.</p> <p>Mailing Address P.O. Box 659408</p> <p>City San Antonio State TX Zip Code 78265</p> <p>Purpose of Disbursement Electric Bill</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-3005</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>21206.77</div> </div> </p>

SUBTOTAL of Disbursements This Page (optional)

21378.49

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

PEPCO ENERGY SERVICES

Mailing Address PO BOX 4863

City
TRENTON

State
NJ

Zip Code
08650-4863

Purpose of Disbursement
Electric Bill

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3006

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6085.82

B.

Full Name (Last, First, Middle Initial)

LEVEL GREEN LANDSCAPING

Mailing Address 139 12TH STREET, SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
Landscaping Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3007

Date of Disbursement

/ /

Amount of Each Disbursement this Period

397.50

C.

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City
PALATINE

State
IL

Zip Code
60038-0001

Purpose of Disbursement
Building Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3008

Date of Disbursement

/ /

Amount of Each Disbursement this Period

132.44

SUBTOTAL of Disbursements This Page (optional)

6615.76

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City
PALATINE

State
IL

Zip Code
60038-0001

Purpose of Disbursement
Building Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3009

Date of Disbursement

/ /

Amount of Each Disbursement this Period

271.50

B.

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City
PALATINE

State
IL

Zip Code
60038-0001

Purpose of Disbursement
Building Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3010

Date of Disbursement

/ /

Amount of Each Disbursement this Period

17.43

C.

Full Name (Last, First, Middle Initial)

DTM COPORATION

Mailing Address 1320 FENWICK LANE STE 700

City
SILVER SPRING

State
MD

Zip Code
20910

Purpose of Disbursement
Security

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3011

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12956.00

SUBTOTAL of Disbursements This Page (optional)

13244.93

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 PageFOR LINE NUMBER:
(check only one)

PAGE 16 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

Spectra Inc.

Mailing Address PO Box 7247-6062

City
PhildelphiaState
PAZip Code
19170-6062Purpose of Disbursement
Healthcare Insurance

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3012

Date of Disbursement

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

Amount of Each Disbursement this Period

13.88

B.

Full Name (Last, First, Middle Initial)

AT&T Mobility

Mailing Address PO Box 6463

City
Carol StreamState
ILZip Code
60197-6463Purpose of Disbursement
Telephone

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3013

Date of Disbursement

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

Amount of Each Disbursement this Period

84.10

C.

Full Name (Last, First, Middle Initial)

BEST PLUMBING SPECIALTIES, INC

Mailing Address P.O. BOX 750

City
MYERSVILLEState
MDZip Code
21773Purpose of Disbursement
Electricity/Plumbing Repairs

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3014

Date of Disbursement

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

Amount of Each Disbursement this Period

76.44

SUBTOTAL of Disbursements This Page (optional)

174.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

BOND WATER TECHNOLOGIES, INC

Mailing Address 630 East Diamond Avenue
suite J/K

City State Zip Code
GAITHERSBURG MD 20877

Purpose of Disbursement
HVAC-Water Treatment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3015

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

COMCAST

Mailing Address PO BOX 3005

City State Zip Code
SOUTHEASTERN PA 19398

Purpose of Disbursement
Cable Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3016

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Eagle Mast & Floor Products

Mailing Address 932 Hugerford Drive
Suite 37B

City State Zip Code
Rockville MD 20850

Purpose of Disbursement
Maintenance Contract

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3018

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

3774.39

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

GSI- Gali Services

Mailing Address 6931 Arlington Rd.
Suite B

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Cleaning Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3019

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.39

B.

Full Name (Last, First, Middle Initial)

Genesis Security System LLC

Mailing Address 20459 Seneca Meadows Parkway

City Germantown State MD Zip Code 20876

Purpose of Disbursement
Security

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3020

Date of Disbursement

/ /

Amount of Each Disbursement this Period

437.94

C.

Full Name (Last, First, Middle Initial)

Johnson Towers Inc.

Mailing Address P.O. Box 630804

City Baltimore State MD Zip Code 21263-0804

Purpose of Disbursement
Building Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3021

Date of Disbursement

/ /

Amount of Each Disbursement this Period

395.15

SUBTOTAL of Disbursements This Page (optional)

845.48

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 PageFOR LINE NUMBER:
(check only one)

PAGE 19 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

MECCO, INC.

Mailing Address 10545 GUILFORD ROAD #105
PO BOX 767

City JESSUP State MD Zip Code 20794

Purpose of Disbursement

Maintenance Contract

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3022

Date of Disbursement

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

Amount of Each Disbursement this Period

266.25

B.

Full Name (Last, First, Middle Initial)

Peake DeLancey

Mailing Address 2500 Schuster Drive

City Cheverly State MD Zip Code 20781

Purpose of Disbursement

Office Expenses

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3023

Date of Disbursement

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

Amount of Each Disbursement this Period

720.80

C.

Full Name (Last, First, Middle Initial)

RUST INSURANCE AGENCY INC

Mailing Address 910 17TH ST. NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Insurance Premium Expenses

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3024

Date of Disbursement

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

Amount of Each Disbursement this Period

3042.00

SUBTOTAL of Disbursements This Page (optional)

4029.05

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

MECCO, INC.

Mailing Address 10545 GUILFORD ROAD #105
PO BOX 767

City JESSUP State MD Zip Code 20794

Purpose of Disbursement
HVAC Repairs

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3025

Date of Disbursement

02 / 25 / 2010

Amount of Each Disbursement this Period

360.00

B.

Full Name (Last, First, Middle Initial)

Freestate

Mailing Address 13335 Mid Atlanatic Blvd.

City Laurel State MD Zip Code 20708

Purpose of Disbursement
Electricity/Plumbing Repairs

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3026

Date of Disbursement

02 / 25 / 2010

Amount of Each Disbursement this Period

6514.10

C.

Full Name (Last, First, Middle Initial)

Rasevic Snow Service

Mailing Address 5200 River Rd.

City Bethesda State MD Zip Code 20816

Purpose of Disbursement
Landscaping Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3027

Date of Disbursement

02 / 25 / 2010

Amount of Each Disbursement this Period

5782.30

SUBTOTAL of Disbursements This Page (optional)

12656.40

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 21 / 22

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rasevic Snow Service</p> <p>Mailing Address 5200 River Rd.</p> <p>City Bethesda State MD Zip Code 20816</p> <p>Purpose of Disbursement Landscaping Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-3028</p> <p>Date of Disbursement <div> <div>02</div> <div>25</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>35982.46</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rasevic Snow Service</p> <p>Mailing Address 5200 River Rd.</p> <p>City Bethesda State MD Zip Code 20816</p> <p>Purpose of Disbursement Landscaping Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-3029</p> <p>Date of Disbursement <div> <div>02</div> <div>25</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>4144.90</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rasevic Snow Service</p> <p>Mailing Address 5200 River Rd.</p> <p>City Bethesda State MD Zip Code 20816</p> <p>Purpose of Disbursement Landscaping Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-3030</p> <p>Date of Disbursement <div> <div>02</div> <div>25</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>408.10</div> </p>

SUBTOTAL of Disbursements This Page (optional)

40535.46

TOTAL This Period (last page this line number only)

164624.46

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
Salaries

Candidate Name
DNC SERVICES CORPORATION

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB22-3017

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8260.28

SUBTOTAL of Disbursements This Page (optional)

8260.28

TOTAL This Period (last page this line number only)

8260.28