

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 Party of Virginia

ADDRESS (number and street) 1108 E MAIN STREET, 2ND FLOOR RICHMOND VA 23219

2. FEC IDENTIFICATION NUMBER C00155952 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 10 19 2006 through 11 27 2006

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 Abbi Easter

Signature of Treasurer Electronically Filed by Abbi Easter Date 05 07 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Democratic Party of Virginia

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

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| D | D |
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 To: 

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| 2 | 7 |

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| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |          |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 6 |  | -7835.49 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |          |
| 2   | 0                       | 0                                 | 6 |   |   |   |   |   |  |          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 310521.13               |                                   |   |   |   |   |   |   |  |          |
| (c) Total Receipts (from Line 19) .....   | 1541942.76              | 2746557.67                        |   |   |   |   |   |   |  |          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 1852463.89              | 2738722.18                        |   |   |   |   |   |   |  |          |
| 7. Total Disbursements (from Line 31) .....   | 1649266.31              | 2535524.60                        |   |   |   |   |   |   |  |          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 203197.58               | 203197.58                         |   |   |   |   |   |   |  |          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |          |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 37968.92                |                                   |   |   |   |   |   |   |  |          |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Democratic Party of Virginia

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
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|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 1 |

|   |   |
|---|---|
| D | D |
| 2 | 7 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 60067.38                      | 279226.30                         |
| (i) Itemized (use Schedule A) .....  | 36995.64                      | 141346.54                         |
| (ii) Unitemized .....  | 97063.02                      | 420572.84                         |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 238791.92                     | 238791.92                         |
| (b) Political Party Committees .....   | 168015.00                     | 242365.41                         |
| (c) Other Political Committees (such as PACs) .....  | 503869.94                     | 901740.17                         |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     |                               |                                   |
| 12. Transfers From Affiliated/Other Party Committees .....   | 818968.00                     | 1450425.45                        |
| 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) ..... | 3495.00                       | 5644.66                           |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 1120.96                       | 44650.45                          |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 67403.58                      | 197021.66                         |
| (b) Levin Funds (from Schedule H5) .....   | 147085.28                     | 147085.28                         |
| (c) Total Transfer (add 18(a) and 18(b)).  | 214488.86                     | 344106.94                         |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 1541942.76                    | 2746567.67                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 1327453.90                    | 2402460.73                        |

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

| <b>II. DISBURSEMENTS</b>  | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---|---------------------------------------|---|
| 21. Operating Expenditures:   |                                       |   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                      |                                       |   |
| (i) Federal Share.....  | 7262.21                               | 121100.85                                 |
| (ii) Non-Federal Share.....   | 27320.54                              | 304142.32                                 |
| (b) Other Federal Operating Expenditures.....   | 25810.51                              | 84422.05                                  |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           | 60393.26                              | 509665.22                                 |
| 22. Transfers to Affiliated/Other Party Committees.....   | 0.00                                  | 100.00                                    |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          | 0.00                                  | 6454.00                                   |
| 24. Independent Expenditure (use Schedule E) .....  | 15012.87                              | 15012.87                                  |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....  | 120735.19                             | 129476.44                                 |
| 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 .....                                   | 2900.00                               | 3230.00                                   |
| (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)) .....                            | 2900.00                               | 3230.00                                   |
| 29. Other Disbursements.....  | 0.00                                  | 47766.10                                  |
| 30. Federal Election Activity (2 U.S.C 431(20))   |                                       |   |
| (a) Shared Federal Election Activity (from Schedule H6)   |                                       |   |
| (i) Federal Share .....   | 170079.15                             | 170079.15                                 |
| (ii) "Levin" Share .....  | 639821.72                             | 639821.72                                 |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            | 640324.12                             | 1013919.10                                |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....               | 1450224.99                            | 1823819.97                                |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..        | 1649266.31                            | 2535524.60                                |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 982124.05                             | 1591560.56                                |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 503869.94                     | 901740.17                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 2900.00                       | 3230.00                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 500969.94                     | 898510.17                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 33072.72                      | 205522.90                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 3495.00                       | 5644.66                           |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 29577.72                      | 199878.24                         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 6 / 742                 |
|  | (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)  
Democratic Party of Virginia

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Constance T Wynn   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 1 / 1 4 / 2 0 0 6 |  |
| Mailing Address 530 N Main St   |   | <b>Transaction ID:</b> C164128                                |  |
| City State Zip Code<br>Blackstone VA 23824-1030   | Amount of Each Receipt this Period<br>50.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer N/A<br>Occupation Retired  | Aggregate Year-to-Date ▼<br>380.00          |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Mary Alice Plummer   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |  |
| Mailing Address PO Box 35   |  | <b>Transaction ID:</b> C163865                                |  |
| City State Zip Code<br>Greenwood VA 22943-0035  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Self<br>Occupation Personal Finance  | Aggregate Year-to-Date ▼<br>250.00           |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Mary Owen  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |  |
| Mailing Address 9090 Nesselwood Cir   |  | <b>Transaction ID:</b> C163889                                |  |
| City State Zip Code<br>Mechanicsville VA 23116-3122   | Amount of Each Receipt this Period<br>100.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Occupation RETIRED  | Aggregate Year-to-Date ▼<br>350.00           |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

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| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 400.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 / 742                 |
|  | <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)  
Democratic Party of Virginia

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Laurie S Fulton  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |  |
| Mailing Address 510 Cameron Street  |  | <b>Transaction ID:</b> C164225                                |  |
| City State Zip Code<br>Alexandria VA 22314  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Williams & Connolly LLP   | Occupation<br>Attorney                       |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> N. Leslie Saunders, Jr.  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 5 / 2 0 0 6 |  |
| Mailing Address 4537 Wellington Farms Drive   |  | <b>Transaction ID:</b> C164580                                |  |
| City State Zip Code<br>Chester VA 23831-1203  | Amount of Each Receipt this Period<br>150.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Saunders, Cary & Patterson  | Occupation<br>Lawyer                         |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>750.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Mimi Milner Elrod  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address PO Box 534  |   | <b>Transaction ID:</b> C164293                                |  |
| City State Zip Code<br>Lexington VA 24450-0534  | Amount of Each Receipt this Period<br>35.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |   |   |  |
| Name of Employer<br>Washington and Lee University   | Occupation<br>Administrator/Educator        |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>235.00          |   |  |

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| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 435.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 8 / 742                 |
|  | <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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
John Ray Alford

Mailing Address 118 Bennington drive

City Lynchburg State VA Zip Code 24503-3050

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 7 / 2 0 0 6

**Transaction ID:** C164686

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Stephanie Jayne Powers

Mailing Address 5534 Jowett Ct

City Alexandria State VA Zip Code 22315-5538

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

**Transaction ID:** C164473

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
William E. Peterson

Mailing Address 12500 Fair Lakes Circle Suite 400

City Fairfax State VA Zip Code 22033

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

Name of Employer Peterson Management Occupation CFO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 1 4 / 2 0 0 6

**Transaction ID:** C164143

Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5350.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 9 / 742                 |
|  | <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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
J. H. Holleman

Mailing Address 2200 Sandfiddler Rd

City State Zip Code  
Virginia Beach VA 23456-4614

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

Name of Employer Retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 6

**Transaction ID: C164177**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Ralph Johnson Grimsley

Mailing Address 700 Wormley Creek Dr

City State Zip Code  
Yorktown VA 23692-4237

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

Name of Employer N/A Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
342.50

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

**Transaction ID: C164596**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Edith Ramaley Wilson

Mailing Address 2804 Farm Rd

City State Zip Code  
Alexandria VA 22302-2404

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

Name of Employer World Bank Occupation Public Affairs

Receipt For: 2006  
 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 5 / 2 0 0 6

**Transaction ID: C164586**

Amount of Each Receipt this Period  
500.00

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>650.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 10 / 742                |
|  | (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)  
Democratic Party of Virginia

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. W. Austin Ligon</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 19 / 2006 |
| Mailing Address 970 Millers Ln  |   | <b>Transaction ID: C164393</b>                      |
| City State Zip Code<br>Manakin Sabot VA 23103   | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>10000.00      |
| Name of Employer<br>CarMax  | Occupation<br>president   |   |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>10000.00                            |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Patricia S Ticer</b>   |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 19 / 2006 |
| Mailing Address 512 Prince St   |   | <b>Transaction ID: C164490</b>                      |
| City State Zip Code<br>Alexandria VA 22314-3116   | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>100.00        |
| Name of Employer<br>Commonwealth of Virginia  | Occupation<br>General Assembly Member                           |   |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>315.00                              |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Alan R Hunt</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 27 / 2006 |
| Mailing Address PO Box 26   |   | <b>Transaction ID: C164700</b>                      |
| City State Zip Code<br>Chincoteague Islan VA 23336  | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer<br>Retired   | Occupation<br>Retired   |   |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00                              |   |

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 10350.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

|  |   |               |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 11 / 742 |
|  | <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)  
Democratic Party of Virginia

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Donna Heivilin</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 5330 36th St N  |   | <b>Transaction ID: C164325</b>                                |  |
| City State Zip Code<br>Arlington VA 22207-1816  | Amount of Each Receipt this Period<br>35.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer<br>US GENERAL ACCOUNTING OFF-ICE   | Occupation<br>ACCOUNTANT                    |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>245.00          |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. James L Sundquist</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |  |
| Mailing Address 900 N Taylor St<br>APT 2117   |  | <b>Transaction ID: C164259</b>                                |  |
| City State Zip Code<br>Arlington VA 22203-1896  | Amount of Each Receipt this Period<br>200.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer  | Occupation<br>Retired                        |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>490.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Catherine G. Peaslee</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 5 / 2 0 0 6 |  |
| Mailing Address 307A 2nd St NW  |  | <b>Transaction ID: C164572</b>                                |  |
| City State Zip Code<br>Charlottesville VA 22902-5011  | Amount of Each Receipt this Period<br>100.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>N/A   | Occupation<br>Retired                        |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>450.00           |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 335.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 12 / 742                |
|  | <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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Thomson Trumpower

Mailing Address 585 Grove Street Suite 201

City Herndon State VA Zip Code 20170

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 4 | / | 2 | 0 | 0 | 6 |

**Transaction ID:** C164142

Amount of Each Receipt this Period  
3500.00

**B.** Full Name (Last, First, Middle Initial)  
George Michael Feldman

Mailing Address 451 Dover Knoll Rd

City Manakin Sabot State VA Zip Code 23103-3117

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

Name of Employer Dept. of Veterans Affairs Occupation Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

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

**Transaction ID:** C164433

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Sharon E Pandak

Mailing Address 11230 Edgemoor Ct

City Woodbridge State VA Zip Code 22192-1146

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

Name of Employer Sands, Marks & Miller Occupation attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

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

**Transaction ID:** C165999

Amount of Each Receipt this Period  
50.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3800.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |  |               |
|--|--|---------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 13 / 742 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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 Party of Virginia

|   |                                      |   |   |
|---|--------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Bevill M. Dean   |                                      | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |   |
| Mailing Address 6000 Saint Andrews Ln   |                                      | <b>Transaction ID:</b> C163892                                |   |
| City Richmond   | State VA                             | Zip Code 23226-3211   | Amount of Each Receipt this Period<br>50.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                      |   |   |
| Name of Employer<br>City of Richmond, VA  | Occupation<br>Clerk of Circuit Court |   |   |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>215.00   |   |   |

|   |                                     |   |  |
|---|-------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Leon Ellsworth   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 4141 N Handelson Rd #225  |                                     | <b>Transaction ID:</b> C164494                                |  |
| City Arlington  | State VA                            | Zip Code 22203  | Amount of Each Receipt this Period<br>250.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     |   |  |
| Name of Employer<br>Information Requested   | Occupation<br>Information Requested |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00  |   |  |

|   |                                    |   |   |
|---|------------------------------------|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Toni Mote  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |   |
| Mailing Address 500 Pacific Ave APT 911   |                                    | <b>Transaction ID:</b> C163915                                |   |
| City Virginia Beach   | State VA                           | Zip Code 23451-3542   | Amount of Each Receipt this Period<br>50.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    |   |   |
| Name of Employer<br>Retired   | Occupation<br>Retired              |   |   |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>215.00 |   |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 350.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 14 / 742                |
|  | <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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
John Grisham

Mailing Address PO Box 4200

City State Zip Code  
Tupelo MS 38803-4200

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

Name of Employer Self Occupation  
Writer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 6

Transaction ID: C164705

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Eric Payne

Mailing Address 3320 Hanover Ave

City State Zip Code  
Richmond VA 23221

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

Name of Employer Information Requested Occupation  
Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
566.45

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

Transaction ID: C166023

Amount of Each Receipt this Period  
566.45

**C.** Full Name (Last, First, Middle Initial)  
Jean C Dunbar

Mailing Address 108 W. Preston Street

City State Zip Code  
Lexington VA 24450

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

Name of Employer Historic Design, Inc Occupation  
Consultant/Contractor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 6

Transaction ID: C164173

Amount of Each Receipt this Period  
250.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>5816.45</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 15 / 742                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Suchada V. Langley

Mailing Address 2435 Flint Hill Rd

City State Zip Code  
Vienna VA 22181-5448

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

Name of Employer Occupation  
USDA Economist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1780.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 6

**Transaction ID: C163888**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Charles Nolen Price

Mailing Address 4800

City State Zip Code  
Alexandria VA 22311-5056

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 6

**Transaction ID: C163937**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Peter J. Zuur

Mailing Address 10 Weston Dr

City State Zip Code  
Staunton VA 24401-2268

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

Name of Employer Occupation  
AHCSB, covington Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

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

**Transaction ID: C164389**

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 5350.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 16 / 742                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Constance R McAdam

Mailing Address 3800 Fairfax Dr

City State Zip Code  
Arlington VA 22203

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

Name of Employer Retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

**Transaction ID: C163835**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Hattie Barker

Mailing Address 321 S. Lee St.

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID: C164474**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Paul Zimmert

Mailing Address 1101 Peppertree Drive

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Self Occupation Dentist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID: C164175**

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 17 / 742                |
|  | <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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
JOHN LAWTON

Mailing Address 2411 18TH ST N

City ARLINGTON State VA Zip Code 22201-3508

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

Name of Employer C F T C Occupation ATTORNEY

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 0 6

**Transaction ID: C164360**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Norton W. Hurd

Mailing Address PO Box 190

City Deltaville State VA Zip Code 23043-0190

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

Name of Employer N/A Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

**Transaction ID: C164594**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Jack Molenkamp

Mailing Address 1908 Lakenwoods Drive

City Bumpass State VA Zip Code 23024

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

Name of Employer Hunton & Williams Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

**Transaction ID: C164248**

Amount of Each Receipt this Period  
100.00

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 650.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 18 / 742                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Whitney C Fuller

Mailing Address 1948 Hopewood Dr

City Falls Church State VA Zip Code 22043

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

**Transaction ID:** C164302

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Ronald Lester Platt

Mailing Address 10110 Walker Lake Dr

City Great Falls State VA Zip Code 22066-3502

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

Name of Employer Greenberg Research Occupation Senior Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** C166071

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Dorothy P Egelhoff

Mailing Address 7835 Marilea Rd

City Richmond State VA Zip Code 23225-1123

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

Name of Employer N/A Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

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

**Transaction ID:** C164247

Amount of Each Receipt this Period  
 25.00

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>775.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|  |  |               |
|--|--|---------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 19 / 742 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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 Party of Virginia

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Gloria J Haislip   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 4 / 2 0 0 6 |  |
| Mailing Address 112 Waugh Dr  |   | <b>Transaction ID:</b> C164005                                |  |
| City State Zip Code<br>Galax VA 24333-2615  | Amount of Each Receipt this Period<br>50.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer N/A<br>Occupation Retired  | Aggregate Year-to-Date ▼<br>465.00          |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Patrick H Butler, III  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address PO Box 16449  |  | <b>Transaction ID:</b> C164493                                |  |
| City State Zip Code<br>Alexandria VA 22302-8449   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Self<br>Occupation Historian/Consultant  | Aggregate Year-to-Date ▼<br>250.00           |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Lisa Claire Dvoskin  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 1 / 0 6 / 2 0 0 6 |  |
| Mailing Address 9302 Lee Highway Suite 300  |  | <b>Transaction ID:</b> C164088                                |  |
| City State Zip Code<br>Mc Lean VA 22101-1837  | Amount of Each Receipt this Period<br>10000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Homemaker<br>Occupation Accountant   | Aggregate Year-to-Date ▼<br>10000.00           |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 10300.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |          |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 20 / 742                |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 12  |
|  |   | <input type="checkbox"/> 16  |
|  |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                                    |   |  |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Dean F Wilhelm   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 6460 Autumn Glen Ct   |                                    | <b>Transaction ID:</b> C164367                                |  |
| City<br>Alexandria  | State<br>VA                        | Amount of Each Receipt this Period<br>250.00                  |  |
| Zip Code<br>22312-1440  |                                    |   |  |
| FEC ID number of contributing federal political committee.<br>C   |                                    |   |  |
| Name of Employer<br>Holiday Inn Capitol   | Occupation<br>General Manager      |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00 |   |  |

|   |                                    |   |  |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Claus Marzen   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 6 / 2 0 0 6 |  |
| Mailing Address 9125 Glenbrook Road   |                                    | <b>Transaction ID:</b> C164593                                |  |
| City<br>Fairfax   | State<br>VA                        | Amount of Each Receipt this Period<br>200.00                  |  |
| Zip Code<br>22031   |                                    |   |  |
| FEC ID number of contributing federal political committee.<br>C   |                                    |   |  |
| Name of Employer<br>United States Government  | Occupation<br>Employee             |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>400.00 |   |  |

|   |                                    |   |  |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Marilyn W Hickey   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 709 N Frederick St  |                                    | <b>Transaction ID:</b> C165997                                |  |
| City<br>Arlington   | State<br>VA                        | Amount of Each Receipt this Period<br>100.00                  |  |
| Zip Code<br>22203-1412  |                                    |   |  |
| FEC ID number of contributing federal political committee.<br>C   |                                    |   |  |
| Name of Employer<br>Self-Employed   | Occupation<br>Civil Leader         |   |  |
| Receipt For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>350.00 |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 550.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 21 / 742                |
|  | (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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Robert S. Ripley

Mailing Address PO BOX 2506

City State Zip Code  
Roanoke VA 24010-2506

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

Name of Employer Occupation  
retired retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 6

**Transaction ID:** C164050

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Jonathan Anthony Sisson

Mailing Address 8713 Prudence Dr

City State Zip Code  
Annandale VA 22003-4153

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

**Transaction ID:** C164428

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Jason Glenn Hopkins

Mailing Address 5670 Tower Hill Circle

City State Zip Code  
Alexandria VA 22315

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

Name of Employer Occupation  
Hopkins House Fundraiser/Educator

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

**Transaction ID:** C164470

Amount of Each Receipt this Period  
300.00

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>650.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 22 / 742                |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Herbert O. Funsten   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |  |
| Mailing Address 116 Mill Neck Rd  |  | <b>Transaction ID:</b> C163885                                |  |
| City State Zip Code<br>Williamsburg VA 23185  |  | Amount of Each Receipt this Period<br>200.00                  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Retired<br>Occupation Retired  |  |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>450.00                            |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Wesley Callender   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 1088 Manning St   |  | <b>Transaction ID:</b> C164489                                |  |
| City State Zip Code<br>Great Falls VA 22066   |  | Amount of Each Receipt this Period<br>500.00                  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Self<br>Occupation Architect   |  |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>750.00                            |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Uaw V Cap  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 1 / 0 3 / 2 0 0 6 |  |
| Mailing Address 8000 East Jefferson Drive   |  | <b>Transaction ID:</b> C164318                                |  |
| City State Zip Code<br>Detroit MI 48214-3963  |  | Amount of Each Receipt this Period<br>5000.00                 |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer Information Requested<br>Occupation Information Requested  |  |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>5000.00                           |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 5700.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 23 / 742                |
|  | <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)  
Democratic Party of Virginia

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> William A Boleyn   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 9711 Waterfront Dr  |  | <b>Transaction ID:</b> C166002                                  |  |
| City State Zip Code<br>Manassas VA 20111-2608   | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer N/A<br>Occupation Retired  | Aggregate Year-to-Date ▼<br>250.00           |   |  |
| Receipt For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Fred W. Hudson   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 2 5 / 2 0 0 6 |  |
| Mailing Address PO Box 84   |   | <b>Transaction ID:</b> C164562                                  |  |
| City State Zip Code<br>Free Union VA 22940-0084   | Amount of Each Receipt this Period<br>50.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer N/A<br>Occupation Retired  | Aggregate Year-to-Date ▼<br>215.00          |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> John Wingard   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 2 4 / 2 0 0 6 |  |
| Mailing Address 4065 22nd St N  |  | <b>Transaction ID:</b> C164028                                  |  |
| City State Zip Code<br>Arlington VA 22207-3957  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer US Dept of Housing & Urban Dev.<br>Occupation Attorney   | Aggregate Year-to-Date ▼<br>250.00           |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 550.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

|  |   |
|--|---|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 24 / 742</span> |
|  | (check only one)  |
| <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"/>   | <input type="checkbox"/> 17                                       |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Michael David Solomon

Mailing Address 1849 Massachusetts Ave

City State Zip Code  
Mc Lean VA 22101-4906

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

Name of Employer Occupation  
US Dept of Treasury Director of Capital Policy

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

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

**Transaction ID:** C164509

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Marvin Wilbert Coulton

Mailing Address 13403 Delaney Rd

City State Zip Code  
Woodbridge VA 22193-4833

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

Name of Employer Occupation  
Company in Maryland President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 6

**Transaction ID:** C164689

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Jane Brown Foster

Mailing Address 6 Gildersleeve Wood

City State Zip Code  
Charlottesville VA 22903-3208

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

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

**Transaction ID:** C164223

Amount of Each Receipt this Period  
100.00

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>400.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|  |  |               |
|--|--|---------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 25 / 742 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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 Party of Virginia

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Michael Peter Chaplin</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 10606 Blossomwood Rd  |  | <b>Transaction ID: C164432</b>                                |  |
| City State Zip Code<br>Chesterfield VA 23832-7042   | Amount of Each Receipt this Period<br>300.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>VDOT  | Occupation<br>Computer Systems Engineer      |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. John W Niels</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |  |
| Mailing Address 1023 Pine Hill Rd   |  | <b>Transaction ID: C163922</b>                                |  |
| City State Zip Code<br>Mc Lean VA 22101-2241  | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Howrey & Simon  | Occupation<br>Attorney                       |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Melissa M Bondi</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |  |
| Mailing Address 156 A N Bedford Street  |  | <b>Transaction ID: C163933</b>                                |  |
| City State Zip Code<br>Arlington VA 22201   | Amount of Each Receipt this Period<br>355.93 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer<br>Self  | Occupation<br>Civic Activist                 |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>355.93           |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 1155.93 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 26 / 742                |
|  | <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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Robert Yuen Pai Tsien

Mailing Address 11000 Carter Cooper Way

City State Zip Code  
Oakton VA 22124

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

Name of Employer Occupation  
Freddie Mac Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 6

**Transaction ID: C164170**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3303 Mill Cross Ct

City State Zip Code  
Oakton VA 22124

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

**Transaction ID: C164353**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Renee Grisham

Mailing Address PO Box 4200

City State Zip Code  
Tupelo MS 38803

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

Name of Employer Occupation  
NA Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 6

**Transaction ID: C164708**

Amount of Each Receipt this Period  
5000.00

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>5500.00</b>  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>60067.38</b> |

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

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

FOR LINE NUMBER: PAGE 27 / 742  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Arlington Democratic Joint Federal Campaign  
Mailing Address 4620 Lee Hwy Ste 214  
City State Zip Code  
Arlington VA 22207-3400  
FEC ID number of contributing federal political committee. **C** C00406041  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
16491.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 6  
**Transaction ID: C163927**  
Amount of Each Receipt this Period  
1231.25

**B.** Full Name (Last, First, Middle Initial)  
Arlington Democratic Joint Federal Campaign  
Mailing Address 4620 Lee Hwy Ste 214  
City State Zip Code  
Arlington VA 22207-3400  
FEC ID number of contributing federal political committee. **C** C00406041  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
16491.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 6  
**Transaction ID: C163926**  
Amount of Each Receipt this Period  
1588.00

**C.** Full Name (Last, First, Middle Initial)  
Arlington Democratic Joint Federal Campaign  
Mailing Address 4620 Lee Hwy Ste 214  
City State Zip Code  
Arlington VA 22207-3400  
FEC ID number of contributing federal political committee. **C** C00406041  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
16491.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 6  
**Transaction ID: C163934**  
Amount of Each Receipt this Period  
154.10

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2973.35**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 28 / 742  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Arlington Democratic Joint Federal Campaign  
 Mailing Address 4620 Lee Hwy Ste 214  
 City State Zip Code  
 Arlington VA 22207-3400  
 FEC ID number of contributing federal political committee. **C** C00406041  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 16491.46

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 1 5 / 2 0 0 6  
**Transaction ID:** C164153  
 Amount of Each Receipt this Period  
 6000.00

**B.** Full Name (Last, First, Middle Initial)  
Democratic National Committee  
 Mailing Address 430 S Capitol St SE  
 City State Zip Code  
 Washington DC 20003-4024  
 FEC ID number of contributing federal political committee. **C** C00010603  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 373275.11

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 1 9 / 2 0 0 6  
**Transaction ID:** C164391  
 Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Democratic National Committee  
 Mailing Address 430 S Capitol St SE  
 City State Zip Code  
 Washington DC 20003-4024  
 FEC ID number of contributing federal political committee. **C** C00010603  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 373275.11

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 0 6  
**Transaction ID:** C163857  
 Amount of Each Receipt this Period  
 4514.71

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10764.71**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 742  
(check only one)

|                              |   |                              |   |
|------------------------------|---|------------------------------|---|
| <input type="checkbox"/> 11a | <input checked="" 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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373275.11

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

**Transaction ID:** C163859

Amount of Each Receipt this Period  
50000.00

**B.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373275.11

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

**Transaction ID:** C163858

Amount of Each Receipt this Period  
38621.40

**C.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373275.11

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

**Transaction ID:** C164630

Amount of Each Receipt this Period  
1000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 89621.40 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

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

FOR LINE NUMBER: PAGE 30 / 742  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373275.11

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 6

**Transaction ID:** C164162

Amount of Each Receipt this Period  
10000.00

**B.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373275.11

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 6

**Transaction ID:** C164160

Amount of Each Receipt this Period  
50000.00

**C.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373275.11

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

**Transaction ID:** C164320

Amount of Each Receipt this Period  
40000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:                        | PAGE 31 / 742                |
|  | (check only one)                        |                              |
| <input type="checkbox"/> 11a   | <input checked="" 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)  
Democratic Party of Virginia

|   |          |   |  |
|---|----------|---|--|
| Full Name (Last, First, Middle Initial)<br>Virginia Victory 2006  |          | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 4 / 2 0 0 6 |  |
| Mailing Address 607 14th St NW<br>8th Floor   |          | Transaction ID: C164029                                       |  |
| City Washington   | State DC | Amount of Each Receipt this Period<br>13500.00                |  |
| Zip Code 20005  |          |   |  |
| FEC ID number of contributing federal political committee. <b>C</b> C00427906   |          |   |  |
| Name of Employer  |          | Occupation  |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Aggregate Year-to-Date ▼<br>58032.46                          |  |

|   |          |   |  |
|---|----------|---|--|
| Full Name (Last, First, Middle Initial)<br>Virginia Victory 2006  |          | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 7 / 2 0 0 6 |  |
| Mailing Address 607 14th St NW<br>8th Floor   |          | Transaction ID: C164707                                       |  |
| City Washington   | State DC | Amount of Each Receipt this Period<br>9000.00                 |  |
| Zip Code 20005  |          |   |  |
| FEC ID number of contributing federal political committee. <b>C</b> C00427906   |          |   |  |
| Name of Employer  |          | Occupation  |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Aggregate Year-to-Date ▼<br>58032.46                          |  |

|   |          |   |  |
|---|----------|---|--|
| Full Name (Last, First, Middle Initial)<br>Virginia Victory 2006  |          | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 1 / 0 1 / 2 0 0 6 |  |
| Mailing Address 607 14th St NW<br>8th Floor   |          | Transaction ID: C164184                                       |  |
| City Washington   | State DC | Amount of Each Receipt this Period<br>10000.00                |  |
| Zip Code 20005  |          |   |  |
| FEC ID number of contributing federal political committee. <b>C</b> C00427906   |          |   |  |
| Name of Employer  |          | Occupation  |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Aggregate Year-to-Date ▼<br>58032.46                          |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 32500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |          |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:                        | PAGE 32 / 742                |
|  | (check only one)                        |                              |
| <input type="checkbox"/> 11a   | <input checked="" 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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Virginia Victory 2006

Mailing Address 607 14th St NW  
8th Floor

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00427906

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
58032.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 6

**Transaction ID:** C164141

Amount of Each Receipt this Period  
2432.46

**B.** Full Name (Last, First, Middle Initial)  
Fairfax County Democratic Committee

Mailing Address 2815 Hartland Road  
Suite 110

City State Zip Code  
Falls Church VA 22043

FEC ID number of contributing federal political committee. **C** C00277541

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID:** C164182

Amount of Each Receipt this Period  
500.00

|  |   |           |
|--|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2932.46   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 238791.92 |

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

|  |  |               |
|--|--|---------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   | PAGE 33 / 742 |
|  | (check only one)   |               |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12<br><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 Party of Virginia

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. HURST FOR CONGRESS INC.</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |  |
| Mailing Address 8643 IVY MINT COURT   |  | <b>Transaction ID: C163932</b>                                |  |
| City State Zip Code<br>SPRINGFIELD VA 22153   | Amount of Each Receipt this Period<br>140.00 |   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00410852</b>  |  |   |  |
| Name of Employer Occupation   |  |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>2297.79                           |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. HURST FOR CONGRESS INC.</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |  |
| Mailing Address 8643 IVY MINT COURT   |  | <b>Transaction ID: C163930</b>                                |  |
| City State Zip Code<br>SPRINGFIELD VA 22153   | Amount of Each Receipt this Period<br>280.00 |   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00410852</b>  |  |   |  |
| Name of Employer Occupation   |  |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>2297.79                           |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 7 / 2 0 0 6 |  |
| Mailing Address 815 16th Street N.W.  |   | <b>Transaction ID: C164706</b>                                |  |
| City State Zip Code<br>Washington DC 20006  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00003806</b>  |   |   |  |
| Name of Employer Occupation   |   |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>5000.00                           |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 5420.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |               |
|--|---|---------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 34 / 742 |
|  | <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)  
Democratic Party of Virginia

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. FRIENDS OF HILLARY</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 1 / 0 3 / 2 0 0 6 |  |
| Mailing Address 1717 K STREET NW SUITE 309A   |   | <b>Transaction ID: C164321</b>                                |  |
| City State Zip Code<br>WASHINGTON DC 20036  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00358895  |   |   |  |
| Name of Employer  | Occupation                                    |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. HOPEFUND</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 1 / 0 6 / 2 0 0 6 |  |
| Mailing Address 607 14TH STREET NW SUITE 800  |   | <b>Transaction ID: C164086</b>                                |  |
| City State Zip Code<br>WASHINGTON DC 20005  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00409052  |   |   |  |
| Name of Employer  | Occupation                                    |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>1 0 / 2 5 / 2 0 0 6 |  |
| Mailing Address 1750 NEW YORK NW  |   | <b>Transaction ID: C164589</b>                                |  |
| City State Zip Code<br>WASHINGTON DC 20006  | Amount of Each Receipt this Period<br>5000.00 |   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C70003108  |   |   |  |
| Name of Employer  | Occupation                                    |   |  |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 742  
(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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Leadership in the New Century

Mailing Address 818 Connecticut Ave, NW  
Suite 1100

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 6

Transaction ID: C164064

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
New Leadership for America

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 6

Transaction ID: C163939

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Honeywell International Political Action Committee

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: C163855

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 742  
(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 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Hoyer for Congress Committee

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** C163854

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
United Mine Workers of America

Mailing Address 8315 Lee Hwy  
5th Floor

City State Zip Code  
Fairfax VA 22031-2215

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 0 | 6 |

**Transaction ID:** C164181

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Forward Together Pac

Mailing Address 201 North Union Street  
Suite 350

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00412791

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 0 | 6 |

**Transaction ID:** C164180

Amount of Each Receipt this Period  
5000.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 11000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |

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

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

FOR LINE NUMBER: PAGE 37 / 742  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A. DOLLARS FOR DEMOCRATS UNITEMIZED**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 South Capitol St. SE Suite 300  
 Suite 300  
 City State Zip Code  
 Washington DC 20003  
 FEC ID number of contributing federal political committee. **C** C00073791  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 379435.22

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 1 9 / 2 0 0 6  
**Transaction ID: C163852**  
 Amount of Each Receipt this Period  
 50000.00

**B. DOLLARS FOR DEMOCRATS UNITEMIZED**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 South Capitol St. SE Suite 300  
 Suite 300  
 City State Zip Code  
 Washington DC 20003  
 FEC ID number of contributing federal political committee. **C** C00073791  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 379435.22

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 3 / 2 0 0 6  
**Transaction ID: C163935**  
 Amount of Each Receipt this Period  
 40000.00

**C. EMILY'S LIST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1120 Connecticut Avenue NW  
 Ste 1100  
 City State Zip Code  
 Washington DC 20036  
 FEC ID number of contributing federal political committee. **C** C00193433  
 Name of Employer Occupation  
 Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 3 / 2 0 0 6  
**Transaction ID: C163940**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **95000.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 38 / 742  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Blue Dog Political Action Committee

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 1 5 / 2 0 0 6

**Transaction ID:** C164157

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Progressive Patriots Committee

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 3 / 2 0 0 6

**Transaction ID:** C163924

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Mailing Address 1625 L STREET NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 3 / 2 0 0 6

**Transaction ID:** C163938

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **13000.00**

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

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

|  |   |   |
|--|---|---|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 39 / 742   |
|  | <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)  
Democratic Party of Virginia

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Ameripac-The Fund for a Greater America</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |
| Mailing Address   |                                     | <b>Transaction ID: C163853</b>                                  |
| City State Zip Code   |                                     | Amount of Each Receipt this Period<br>5000.00                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                     |   |
| Name of Employer  | Occupation                          |   |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION (SEIU) CORPORATION</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 1313 L Street NW  |                                     | <b>Transaction ID: C164082</b>                                  |
| City State Zip Code<br>Washington DC 20005  |                                     | Amount of Each Receipt this Period<br>1595.00                   |
| FEC ID number of contributing federal political committee.<br><b>C C00004036</b>  |                                     |   |
| Name of Employer  | Occupation                          |   |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1595.00 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 2 7 / 2 0 0 6 |
| Mailing Address 100 INDIANA AVENUE NW   |                                     | <b>Transaction ID: C164704</b>                                  |
| City State Zip Code<br>WASHINGTON DC 20001  |                                     | Amount of Each Receipt this Period<br>5000.00                   |
| FEC ID number of contributing federal political committee.<br><b>C C70001516</b>  |                                     |   |
| Name of Employer  | Occupation                          |   |
| Receipt For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>11595.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                 |

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

|  |                              |   |
|--|------------------------------|---|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 40 / 742                           |
|  | (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)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
DRIVE - DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUC

Mailing Address 25 Louisiana Ave. NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 2 | 4 | / | 2 | 0 | 0 | 6 |

Transaction ID: C164030

Amount of Each Receipt this Period  
2000.00

|  |   |           |
|--|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2000.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 168015.00 |

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

|  |  |               |
|--|--|---------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 41 / 742 |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12<br><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)  
Democratic Party of Virginia

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Democratic Congressional Campaign Committee</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 2 5 / 2 0 0 6 |
| Mailing Address 430 South Capitoal Street, SE, 2nd  |  | <b>Transaction ID: C164711</b>                                  |
| City State Zip Code<br>Washington DC 20003  | Amount of Each Receipt this Period<br>75000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer  | Occupation                                     |   |
| Receipt For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>85000.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Democratic Congressional Campaign Committee</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 430 South Capitoal Street, SE, 2nd  |  | <b>Transaction ID: C164715</b>                                  |
| City State Zip Code<br>Washington DC 20003  | Amount of Each Receipt this Period<br>10000.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer  | Occupation                                     |   |
| Receipt For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>85000.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Democratic National Committee</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 430 S Capitol St SE   |  | <b>Transaction ID: C164716</b>                                  |
| City State Zip Code<br>Washington DC 20003-4024   | Amount of Each Receipt this Period<br>68889.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b> C00010603   |  |   |
| Name of Employer  | Occupation                                     |   |
| Receipt For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>373275.11          |   |

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 153889.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |           |

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

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

FOR LINE NUMBER: PAGE 42 / 742  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Cmte.  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C** C00042366  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
890000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 6  
**Transaction ID: C164709**  
Amount of Each Receipt this Period  
75000.00

**B.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Cmte.  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C** C00042366  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
890000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 6  
**Transaction ID: C164710**  
Amount of Each Receipt this Period  
75000.00

**C.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Cmte.  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C** C00042366  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
890000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 6  
**Transaction ID: C164712**  
Amount of Each Receipt this Period  
150000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300000.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 43 / 742  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Cmte.  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C** C00042366  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
890000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 6  
**Transaction ID: C164713**  
Amount of Each Receipt this Period  
90000.00

**B.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Cmte.  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C** C00042366  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
890000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 6  
**Transaction ID: C164714**  
Amount of Each Receipt this Period  
225000.00

**C.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Cmte.  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C** C00042366  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
890000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 6  
**Transaction ID: C164717**  
Amount of Each Receipt this Period  
50000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **365000.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |  |
|--|------------------------------|--|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 44 / 742                          |
|  | (check only one)             |  |
| <input type="checkbox"/> 11a   | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c           |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input checked="" type="checkbox"/> 12 |
|  |                              | <input type="checkbox"/> 15            |
|  |                              | <input type="checkbox"/> 16            |
|  |                              | <input type="checkbox"/> 17            |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

A. Full Name (Last, First, Middle Initial)  
Alexandria Democratic Committee

Mailing Address 618 N Washington St

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Alexandria | VA    | 22314-1914 |

FEC ID number of contributing federal political committee. **C** C00402628

|                  |                 |
|------------------|-----------------|
| Name of Employer | Occupation      |
|                  | Party Committee |

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1413.71

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 3 / 2 0 0 6

Transaction ID: C163929

Amount of Each Receipt this Period  
 79.00

|  |   |           |
|--|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 79.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 818968.00 |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 742  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Benenson Strategy Group

Mailing Address 14 East 60th St

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 6

**Transaction ID:** C164154

Amount of Each Receipt this Period  
1100.00

**B.** Full Name (Last, First, Middle Initial)  
Predicted List, LLC

Mailing Address 1101 14th Street NW  
3rd Floor

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1595.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

**Transaction ID:** C164290

Amount of Each Receipt this Period  
1595.00

**C.** Full Name (Last, First, Middle Initial)  
Peter D. Hart Research Associates Inc.

Mailing Address 1724 Connecticut Ave NW

City State Zip Code  
Washington DC 20009-1183

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

**Transaction ID:** C164298

Amount of Each Receipt this Period  
800.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3495.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 3495.00 |

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

|  |                              |  |
|--|------------------------------|--|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 46 / 742                          |
|  | (check only one)             |  |
| <input type="checkbox"/> 11a   | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c           |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14            |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Commonwealth of Virginia

Mailing Address Department of Taxation  
PO Box 658

City Richmond State VA Zip Code 23218

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
33087.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 6 | / | 2 | 0 | 0 | 6 |

**Transaction ID:** C164742

Amount of Each Receipt this Period  
800.85

**B.** Full Name (Last, First, Middle Initial)  
Wachovia

Mailing Address 100 N Main Street

City Winston Salem State NC Zip Code 27150-0001

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1114.44

Date of Receipt  

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

**Transaction ID:** C164718

Amount of Each Receipt this Period  
320.11

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1120.96 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 1120.96 |

**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 47 / 742

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Wachovia</b>  |  | Transaction ID: D31678<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 100 N Main Street  |  | Amount of Each Disbursement this Period<br>31.20   |
| City Winston Salem<br>State NC<br>Zip Code 27150-0001  | Purpose of Disbursement<br>Debit Card Merchant Charges<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Wachovia</b>  |  | Transaction ID: D31689<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 100 N Main Street  |  | Amount of Each Disbursement this Period<br>39.00   |
| City Winston Salem<br>State NC<br>Zip Code 27150-0001  | Purpose of Disbursement<br>Debit Card Merchant Fees<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. US Postmaster</b>   |  | Transaction ID: D31609<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 0 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>600.00  |
| City Merrifield<br>State VA<br>Zip Code 22081  | Purpose of Disbursement<br>Postage<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 670.20      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 48 / 742

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster</b>   |  | <b>Transaction ID:</b> D33130<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 2 4 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>2510.67   |
| City Merrifield State VA Zip Code 22081  | Purpose of Disbursement Postage<br>Candidate Name<br>Category/Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. US Postmaster</b>   |  | <b>Transaction ID:</b> D33131<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 2 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>2510.67   |
| City Merrifield State VA Zip Code 22081  | Purpose of Disbursement Postage<br>Candidate Name<br>Category/Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Bjorklund Communications</b>  |  | <b>Transaction ID:</b> D31633<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 3022 Sylvan Drive  |  | Amount of Each Disbursement this Period<br>7704.00   |
| City Falls Church State VA Zip Code 22042  | Purpose of Disbursement Bulldozer Cards<br>Candidate Name<br>Category/Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 12725.34 |
| <b>TOTAL</b> 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 49 / 742

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Direct Line Politics</b>  |  | <b>Transaction ID:</b> D31754<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6 |
| Mailing Address 107 Oronoco Street<br>Suite 100  |  | Amount of Each Disbursement this Period<br>12070.16  |
| City Alexandria State VA Zip Code 22314  |  |  |
| Purpose of Disbursement Fundraising Consulting<br>Candidate Name   |  | Category/<br>Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. American Express</b>  |  | <b>Transaction ID:</b> D33133<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 1 7 / 2 0 0 6 |
| Mailing Address PO Box 650448  |  | Amount of Each Disbursement this Period<br>69.14   |
| City Dallas State TX Zip Code 75265  |  |  |
| Purpose of Disbursement Merchant Fees<br>Candidate Name  |  | Category/<br>Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. David John Mills</b>  |  | <b>Transaction ID:</b> D31623<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 2300 East Cary Street<br>Apartment #523  |  | Amount of Each Disbursement this Period<br>64.80   |
| City Richmond State VA Zip Code 23223  |  |  |
| Purpose of Disbursement Beverage Reimbursement<br>Candidate Name   |  | Category/<br>Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 12204.10 |
| <b>TOTAL</b> 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 50 / 742

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Party of Virginia

|   |                     |  |                   |
|---|---------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Adam Goers</b>   |                     | Transaction ID: D31627<br>Date of Disbursement<br>10 / 23 / 2006   |                   |
| Mailing Address 426 C Street NE   |                     | Amount of Each Disbursement this Period<br>210.87  |                   |
| City<br>Washington  | State<br>DC         | Zip Code<br>20002  | Category/<br>Type |
| Purpose of Disbursement<br>Fundraiser Expense Reimbursement   |                     |  |                   |
| Candidate Name  |                     | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:<br>District: |  |                   |

**SUBTOTAL** of Disbursements This Page (optional) .....

210.87

**TOTAL** This Period (last page this line number only) .....

25810.51

# 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 51 / 742

|                              |   |                              |                              |                             |                              |
|------------------------------|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)  
Democratic Party of Virginia

|  |  |  |                   |
|--|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Bob Thompson</b>  |  | Transaction ID: D31651<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 4 / 2 0 0 6 |                   |
| Mailing Address 1327 Merrie Ridge Road   |  | Amount of Each Disbursement this Period<br>2900.00   |                   |
| City<br>Mc Lean  | State<br>VA  | Zip Code<br>22101  | Category/<br>Type |
| Purpose of Disbursement<br>Contribution Refund   |  |  |                   |
| Candidate Name   |  |  |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |
| State:      District:  |  |  |                   |

|  |   |                |
|--|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | <b>2900.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | <b>2900.00</b> |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Wynter Walden</b>   |  | <b>Transaction ID: D32801</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 301 Oakhill Rd.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Petersburg  | State VA Zip Code 23805  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. PemberlyFountain</b>  |  | <b>Transaction ID: D32351</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1909 Fairfield Ave.  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. E. HowardMacklin II</b>   |  | <b>Transaction ID: D32670</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 5 Gregory Court  |  | Amount of Each Disbursement this Period<br>65.00                        |
| City Hampton   | State VA Zip Code 23669  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 245.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. GregoryDavis</b>  |  | <b>Transaction ID: D32109</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1712 Brookfield Rd.  |  | Amount of Each Disbursement this Period<br>80.00                        |
| City Richmond  | State VA Zip Code 23222  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. LatoyaFitzgerald</b>  |  | <b>Transaction ID: D32514</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1505 Hickey St.  |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Byron Nichols</b>   |  | <b>Transaction ID: D32454</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1326 w 26 th st  |  | Amount of Each Disbursement this Period<br>136.00                       |
| City Norfolk   | State VA Zip Code 23508  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 376.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____  |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Darryl Hawkins</b>  |  | <b>Transaction ID: D31843</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3500 Delaware Ave.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23222  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Cardell Patillo</b>   |  | <b>Transaction ID: D32658</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1509 Ellington Sq.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Portsmouth<br>State VA<br>Zip Code 23701  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Philip Thornton</b>   |  | <b>Transaction ID: D32556</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 830 27th Street  |  | Amount of Each Disbursement this Period<br>180.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>300.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box)   |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TobiasYoung</b>   |  | <b>Transaction ID: D31911</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2522 Bethel St.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KentaeDavis</b>   |  | <b>Transaction ID: D32110</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2354 Fairfield Ave.  |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NickMazarakis</b>   |  | <b>Transaction ID: D32608</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 8148 Tidle Rd.   |  | Amount of Each Disbursement this Period<br>510.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23518   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 650.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. BrandonGrandison</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 807 W. Broad Street<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32095</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>B. DejuanTillman</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N Lombardy Street VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32033</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>C. Hadisha Gordon</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 143 Libbey St<br>City Hampton State VA Zip Code 23663<br>Purpose of Disbursement GOTV Stipend<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31728</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>45.00<br>Category/Type |
|--|--|--|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 197.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DontaviousAdams</b>   |  | <b>Transaction ID: D32284</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2726 High St.  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JoeyNathaniel</b>   |  | <b>Transaction ID: D31865</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 6225 Warwick Rd  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23224  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. KaredaGreen</b>   |  | <b>Transaction ID: D32415</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 534 E. 21st Street   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....  |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. LillieEstes</b>  |                  | <b>Transaction ID: D32745</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address PO Box 6096   |                  | Amount of Each Disbursement this Period<br>40.00   |                   |
| City Richmond   | State VA         | Zip Code 23223   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. ElizabethHare</b>  |                  | <b>Transaction ID: D32578</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 611 Oleander Circle   |                  | Amount of Each Disbursement this Period<br>240.00  |                   |
| City Virginia Beach   | State VA         | Zip Code 23464   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. NyemaDorsey</b>  |                  | <b>Transaction ID: D31936</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 101 Ironbridge Court #303   |                  | Amount of Each Disbursement this Period<br>60.00   |                   |
| City Hampton  | State VA         | Zip Code 23663   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. EricaWalton</b>   |  | <b>Transaction ID: D32326</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1600 Richmond Ave.   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Alphonso Dale</b>   |  | <b>Transaction ID: D32754</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1103 James Drive   |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Keren Charles</b>   |  | <b>Transaction ID: D31697</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 3 / 2 0 0 6 |  |
| Mailing Address 5720 Earnhardt St  |  | Amount of Each Disbursement this Period<br>1000.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1160.00 |
| <b>TOTAL</b> 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 60 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KeishaScott</b>   |  | <b>Transaction ID: D32125</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2003 Beck Drive  |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JohnWilliams</b>  |  | <b>Transaction ID: D31906</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 209 Fairfield Ave.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Carlos Smith</b>  |  | <b>Transaction ID: D32451</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 915 Briar Hill Rd.   |  | Amount of Each Disbursement this Period<br>136.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23502   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 276.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Patricia Williford</b>  |  | <b>Transaction ID: D32697</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1105 Mosby Street  |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. PernellKnight</b>   |  | <b>Transaction ID: D31962</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 624 -44th Street   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. FreddieFloxxman</b>   |  | <b>Transaction ID: D32074</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 679 Frist Campus Center  |  | Amount of Each Disbursement this Period<br>76.00                        |
| City Princeton   | State NJ Zip Code 8544   |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 156.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DontaeWilliams</b>  |  | <b>Transaction ID: D31999</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1222 29st  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. LashaunHudson</b>   |  | <b>Transaction ID: D32717</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BradleyPitt</b>   |  | <b>Transaction ID: D32562</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 68 Continental Drive   |  | Amount of Each Disbursement this Period<br>180.00                       |
| City Hampton   | State VA Zip Code 23669  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Jackie Battle</b>  |                  | <b>Transaction ID: D31808</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 2522 Bethel St.   |                  | Amount of Each Disbursement this Period<br>60.00   |                   |
| City Richmond   | State VA         | Zip Code 23223   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Brandon Wright</b>   |                  | <b>Transaction ID: D31725</b><br>Date of Disbursement<br>11 / 04 / 2006  |                   |
| Mailing Address 601 W 34th St   |                  | Amount of Each Disbursement this Period<br>45.00   |                   |
| City Norfolk  | State VA         | Zip Code   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Stipend   |                  | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Dewanda Jenkins</b>  |                  | <b>Transaction ID: D31794</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 4101 Sue Cres.  |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Chesapeake   | State VA         | Zip Code 23324   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 225.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LucyCruz</b> |  | <b>Transaction ID: D32190</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3207 Appleford Drive                          |  | Amount of Each Disbursement this Period<br>100.00   |  |
| City Chester State VA Zip Code 23831                          | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TaylorScott</b> |  | <b>Transaction ID: D31877</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2601 Kensington Ave.                             |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond State VA Zip Code 23220                            | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:   | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AnnetteDaniels</b> |  | <b>Transaction ID: D31830</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2514 Bethel St.                                     |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond State VA Zip Code 23223                               | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KevinBattle</b>   |  | <b>Transaction ID: D32338</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1102 Williamsburg Rd.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23231  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KristalLee</b>  |  | <b>Transaction ID: D32705</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 50 Tupelo Circle   |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Hampton<br>State VA<br>Zip Code 23666   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Sylviaree Frierson</b>  |  | <b>Transaction ID: D32796</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 11270 Lamore Dr.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Disputana<br>State VA<br>Zip Code 23875   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Lillian Hayes</b> |  | <b>Transaction ID: D32682</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2306 Hildreth Street                               |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223                        | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:   | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Brandon Hamlin</b> |  | <b>Transaction ID: D32232</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1425 Holt Drive                                     |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324                       | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Renita Johnson</b> |  | <b>Transaction ID: D32180</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 9507 Spendthrift Circle, #221                       |  | Amount of Each Disbursement this Period<br>100.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23294                         | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....  |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Lottie Jackson</b>  |  | <b>Transaction ID: D31850</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 1109 Mosby Ct.   |  | Amount of Each Disbursement this Period<br>60.00                        |                   |
| City Richmond  | State VA   | Zip Code 23223  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |  |   |                   |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. EricTunstall</b>  |  | <b>Transaction ID: D32384</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 2913 Hanes Ave.  |  | Amount of Each Disbursement this Period<br>120.00                       |                   |
| City Richmond  | State VA   | Zip Code 23222  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |  |   |                   |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Miriam Mainor</b>   |  | <b>Transaction ID: D31585</b><br>Date of Disbursement<br>10 / 19 / 2006 |                   |
| Mailing Address 5828 Hedgerow Cir  |  | Amount of Each Disbursement this Period<br>705.00                       |                   |
| City Portsmouth  | State VA   | Zip Code 23703-1540   | Category/<br>Type |
| Purpose of Disbursement<br>Canvassing Stipend  |  |   |                   |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>885.00</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Miriam Mainer</b>   |  | <b>Transaction ID: D31699</b><br>Date of Disbursement<br>11 / 03 / 2006 |
| Mailing Address 5828 Hedgerow Cir  |  | Amount of Each Disbursement this Period<br>585.00                       |
| City Portsmouth  | State VA Zip Code 23703-1540   |   |
| Purpose of Disbursement<br>GOTV Stipend  |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MaryBailey</b>  |  | <b>Transaction ID: D31806</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1954 Reed St.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CharlieGarner</b>   |  | <b>Transaction ID: D32112</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2414 Maplewood Av  |  | Amount of Each Disbursement this Period<br>80.00                        |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 725.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BrandonCurry</b>  |  | <b>Transaction ID: D32155</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 270 Lee Street   |  | Amount of Each Disbursement this Period<br>90.00                        |  |
| City Hampton<br>State VA<br>Zip Code 23666   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Angelene Coleman</b>  |  | <b>Transaction ID: D32631</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 808 Bold St.   |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Linwood Debrew</b>  |  | <b>Transaction ID: D31619</b><br>Date of Disbursement<br>10 / 23 / 2006 |  |
| Mailing Address 2108 Marshall Ave  |  | Amount of Each Disbursement this Period<br>500.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607-5221   | Purpose of Disbursement<br>Contract Labor  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

**SUBTOTAL** of Disbursements This Page (optional) .....

**630.00**

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MamieWoods</b>  |  | <b>Transaction ID: D32282</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 6217 Wendharpe Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BrianGuldenschuh</b>  |  | <b>Transaction ID: D32467</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2202 Volunteer Trail   |  | Amount of Each Disbursement this Period<br>150.00                       |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. SheliaBowser</b>  |  | <b>Transaction ID: D32628</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2726 High St.  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>310.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |               |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DevaunStraw</b>   |  | <b>Transaction ID: D32269</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1224 Excaliber Court   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ChanitaMedley</b>   |  | <b>Transaction ID: D32568</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 538 Apt H 22nd   |  | Amount of Each Disbursement this Period<br>200.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. KerionWalston</b>   |  | <b>Transaction ID: D32445</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 801 Lassiter Drive   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 440.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |   |  |  |
|---|---|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>LinwoodRadcliffe</p>   |   | <p><b>Transaction ID:</b> D32436<br/><b>Date of Disbursement</b></p>   |  |
| <p>Mailing Address 817A 33rd Street</p>   |   | <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> |  |
| <p>City Newport News</p>  | <p>State VA</p>   | <p>Zip Code 23607</p>  | <p>Amount of Each Disbursement this Period</p> |
| <p>Purpose of Disbursement<br/>GOTV Worker</p>  |   | <p><input type="text"/></p>  | <p><input type="text" value="120.00"/></p>     |
| <p>Candidate Name</p>   |   | <p>Category/<br/>Type</p>  |  |
| <p>Office Sought: <input type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> | <p>Disbursement For: 2006<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> |  |  |
| <p>State: District:</p>   |   |  |  |

|   |   |  |  |
|---|---|--|--|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Clark Gray</p>   |   | <p><b>Transaction ID:</b> D31603<br/><b>Date of Disbursement</b></p>   |  |
| <p>Mailing Address 71138 Alessandra Drive</p>   |   | <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> |  |
| <p>City Matteson</p>  | <p>State IL</p>   | <p>Zip Code 60443</p>  | <p>Amount of Each Disbursement this Period</p> |
| <p>Purpose of Disbursement<br/>Canvassing Stipend</p>   |   | <p><input type="text"/></p>  | <p><input type="text" value="140.00"/></p>     |
| <p>Candidate Name</p>   |   | <p>Category/<br/>Type</p>  |  |
| <p>Office Sought: <input type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> | <p>Disbursement For: 2006<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> |  |  |
| <p>State: District:</p>   |   |  |  |

|   |   |  |  |
|---|---|--|--|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Clark Gray</p>   |   | <p><b>Transaction ID:</b> D31731<br/><b>Date of Disbursement</b></p>   |  |
| <p>Mailing Address 71138 Alessandra Drive</p>   |   | <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> |  |
| <p>City Matteson</p>  | <p>State IL</p>   | <p>Zip Code 60443</p>  | <p>Amount of Each Disbursement this Period</p> |
| <p>Purpose of Disbursement<br/>GOTV Stipend</p>   |   | <p><input type="text"/></p>  | <p><input type="text" value="320.00"/></p>     |
| <p>Candidate Name</p>   |   | <p>Category/<br/>Type</p>  |  |
| <p>Office Sought: <input type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> | <p>Disbursement For: 2006<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> |  |  |
| <p>State: District:</p>   |   |  |  |

|   |  |
|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="580.00"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LaurieWallmark</b>  |  | Transaction ID: D32189<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1 Country Club Drive   |  | Amount of Each Disbursement this Period<br>100.00                |  |
| City Ringoes<br>State NJ<br>Zip Code 8511  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. HoraceRoss</b>  |  | Transaction ID: D32266<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3704 Elkhorn Ave., # A   |  | Amount of Each Disbursement this Period<br>120.00                |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. SpondellaWiliford</b>   |  | Transaction ID: D32752<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1714 Jacquelin St.   |  | Amount of Each Disbursement this Period<br>40.00                 |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....  |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Tammy Jenkins</b>   |  | <b>Transaction ID: D32685</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1332 Tree Ridge Rd.  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AnnetteBryant</b>   |  | <b>Transaction ID: D32480</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 7041 Mamie Blvd.   |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MosesSykes</b>  |  | <b>Transaction ID: D32531</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 678 D Aqua Drive   |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. L.Jackson</b>   |  | <b>Transaction ID: D31849</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2535 Bethel St.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JosieWalters</b>  |  | <b>Transaction ID: D32162</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1711 Kingson Ave.  |  | Amount of Each Disbursement this Period<br>90.00                        |  |
| City Norfolk<br>State VA<br>Zip Code 23503   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BrittanyRhodes</b>  |  | <b>Transaction ID: D31979</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 144 Garrett Drive  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Hampton<br>State VA<br>Zip Code 23669   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 210.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Reggie Neville</b>  |  | <b>Transaction ID: D32255</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address F116 Dhalgren Avenue   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Tyquan Wilkerson</b>  |  | <b>Transaction ID: D31904</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1909 Fairfield Ave.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Michael Griesen</b>   |  | <b>Transaction ID: D32050</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 315 N. Adams St  |  | Amount of Each Disbursement this Period<br>76.00                        |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. NancyAlston</b>  |                  | <b>Transaction ID: D32509</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |                   |
| Mailing Address 1104 Apperson Street  |                  | Amount of Each Disbursement this Period<br>160.00  |                   |
| City Richmond   | State VA         | Zip Code 23223   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. MarciaPrice</b>  |                  | <b>Transaction ID: D32590</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |                   |
| Mailing Address 938 Shore Drive   |                  | Amount of Each Disbursement this Period<br>320.00  |                   |
| City Newport News   | State VA         | Zip Code 23607   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. ChandaJackson</b>  |                  | <b>Transaction ID: D32424</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |                   |
| Mailing Address 813 23rd Street   |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Newport News   | State VA         | Zip Code 23607   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 600.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |
|---|--|---|
| <b>A. LakendraJohnson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 649 12th Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32545</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>180.00<br>Category/Type |
|---|--|---|

|   |  |   |
|---|--|---|
| <b>B. SeanHolihan</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 714 Shirley Ave.<br>City Norfolk State VA Zip Code 23517<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32560</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>180.00<br>Category/Type |
|---|--|---|

|   |  |  |
|---|--|--|
| <b>C. BrittanyJackson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 813 23rd Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31954</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 420.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

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

FOR LINE NUMBER: (check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ArsalaanKhan</b>  |  | <b>Transaction ID: D32020</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 17 W. Broad Street   |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JasmineBell</b>   |  | <b>Transaction ID: D31811</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1113 Eggleston St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JermarioSpruill</b>   |  | <b>Transaction ID: D31988</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 707 LaSalle Ave  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Hampton<br>State VA<br>Zip Code 23667   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 196.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |          |   |                   |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. CassandraBullock</b>  |          | <b>Transaction ID: D32510</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |                   |
| Mailing Address 1604 N. 28th St  |          | Amount of Each Disbursement this Period<br>160.00   |                   |
| City Richmond  | State VA | Zip Code 23223  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |          | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |          |   |                   |
| State: District:   |          |   |                   |

|  |          |   |                   |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. DavidHernandez</b>  |          | <b>Transaction ID: D32086</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |                   |
| Mailing Address 3207 Appleford Drive   |          | Amount of Each Disbursement this Period<br>76.00  |                   |
| City Chester   | State VA | Zip Code 23831  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |          | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |          |   |                   |
| State: District:   |          |   |                   |

|  |          |   |                   |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Derek King</b>  |          | <b>Transaction ID: D31598</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |                   |
| Mailing Address 303 NW 2nd St  |          | Amount of Each Disbursement this Period<br>200.00   |                   |
| City Milford   | State DE | Zip Code 19963  | Category/<br>Type |
| Purpose of Disbursement<br>Canvassing Stipend  |          | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |          |   |                   |
| State: District:   |          |   |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 436.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Derek King</b>  |  | <b>Transaction ID: D31711</b><br>Date of Disbursement<br>11 / 04 / 2006 |  |
| Mailing Address 303 NW 2nd St  |  | Amount of Each Disbursement this Period<br>320.00                       |  |
| City Milford<br>State DE<br>Zip Code 19963   | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DanielMuluneh</b>   |  | <b>Transaction ID: D32160</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5360 Achilles Drive  |  | Amount of Each Disbursement this Period<br>90.00                        |  |
| City Virginia Beach<br>State VA<br>Zip Code 23464  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Rebeccalmholt</b>   |  | <b>Transaction ID: D32030</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 701 West Grace St, Apt 622   |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

**SUBTOTAL** of Disbursements This Page (optional) .....

**486.00**

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Rasha'dBatts</b>  |  | <b>Transaction ID: D31917</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2205 Madison Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CatherineCushenbery</b>   |  | <b>Transaction ID: D32081</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address Frist Campus Center  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Princeton<br>State NJ<br>Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. IreshaPicot</b>   |  | <b>Transaction ID: D32688</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 711 W. Main St.  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

156.00

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

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. EshleyRichardson</b>  |  | <b>Transaction ID: D31980</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1642 Harbor Lane   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. WesleySmith</b>   |  | <b>Transaction ID: D32379</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1102 Williamsburg Rd.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23231  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RachelEaster</b>  |  | <b>Transaction ID: D32734</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address Watson Hall, UVA   |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Charlottesville<br>State VA<br>Zip Code 22093   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____  |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RubenSajnia-Chevere</b> |  | <b>Transaction ID: D32085</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3207 Appleford Drive                                     |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Chester State VA Zip Code 23831                                     | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:   | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TishonPostell</b> |  | <b>Transaction ID: D32371</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1529 N. 20th St.                                   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond State VA Zip Code 23223                              | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:   | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ChoikeMurray</b> |  | <b>Transaction ID: D32187</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2214 Rosewood Ave                                 |  | Amount of Each Disbursement this Period<br>100.00   |  |
| City Richmond State VA Zip Code 23220                             | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 296.00 |
| <b>TOTAL</b> 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 85 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. StewartAdams</b>  |  | <b>Transaction ID: D32627</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1128 Chisholm Cir.   |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KLM Group</b>   |  | <b>Transaction ID: D31753</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6 |  |
| Mailing Address 1256 Nesbitt Dr  |  | Amount of Each Disbursement this Period<br>315.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23453  | Purpose of Disbursement<br>Banner Printing   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CarlosPhipps</b>  |  | <b>Transaction ID: D32718</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>20.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 375.00 |
| <b>TOTAL</b> 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 86 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RaquanLewis</b>   |  | <b>Transaction ID: D32553</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1716 Terminal Ave  |  | Amount of Each Disbursement this Period<br>180.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. GaryMclean</b>  |  | <b>Transaction ID: D32042</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JustinElliott</b>   |  | <b>Transaction ID: D32300</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3400 Brandywine Dr.  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 376.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MiaWilson-Olavarria</b>   |  | <b>Transaction ID: D32005</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 900 Taylor Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MarkHomas</b>   |  | <b>Transaction ID: D31846</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 6225 Warwick Rd  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23225  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. KiannaTaylor</b>  |  | <b>Transaction ID: D31889</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 103 South Lake Dr.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 180.00 |
| <b>TOTAL</b> 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 88 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. OtisDowtin</b>  |  | <b>Transaction ID: D32501</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1718 Hodges Ferry Rd.  |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TomWhipple</b>  |  | <b>Transaction ID: D32151</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3556 N. Valley St  |  | Amount of Each Disbursement this Period<br>80.00                        |
| City Arlington   | State VA Zip Code 22207  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. George Miles</b>  |  | <b>Transaction ID: D32453</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1216 Curie Ct  |  | Amount of Each Disbursement this Period<br>136.00                       |
| City Norfolk   | State VA Zip Code 23513  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 376.00 |
| <b>TOTAL</b> 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 89 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Taliba Boone</b>  |  | Transaction ID: D31592<br>Date of Disbursement<br>10 / 19 / 2006 |  |
| Mailing Address 1807 West Genesee St   |  | Amount of Each Disbursement this Period<br>160.00                |  |
| City Flint<br>State MI<br>Zip Code 48504   | Purpose of Disbursement<br>Canvassing Stipend  | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Taliba Boone</b>  |  | Transaction ID: D31706<br>Date of Disbursement<br>11 / 04 / 2006 |  |
| Mailing Address 1807 West Genesee St   |  | Amount of Each Disbursement this Period<br>390.00                |  |
| City Flint<br>State MI<br>Zip Code 48504   | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CarolJohnson</b>  |  | Transaction ID: D31852<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3330 Nine Mile Rd  |  | Amount of Each Disbursement this Period<br>60.00                 |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 610.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. FlorenceSmith</b>   |  | <b>Transaction ID: D31881</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1813 Westmoore St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kevin Banks</b>   |  | <b>Transaction ID: D32761</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5944 Lockamy Lane  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BobbitGladney</b>   |  | <b>Transaction ID: D32303</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 517 Taft Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ReginaldHudgins</b>   |  | <b>Transaction ID: D31950</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 739 B 18th   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ShirleyBridges</b>  |  | <b>Transaction ID: D32524</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 18 Brentwood Drive   |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Hampton<br>State VA<br>Zip Code 23669   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JamelAdams</b>  |  | <b>Transaction ID: D32283</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2726 High St.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. VermaStokes</b>   |  | <b>Transaction ID: D32442</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1511 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SandraBowen</b>   |  | <b>Transaction ID: D32395</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1433 Jefferson   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TonikaWright</b>  |  | <b>Transaction ID: D32332</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3007 Turnpike Rd.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <p><b>A. ClintonGrant</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7721 Harrison Rd.</p> <p>City Norfolk State VA Zip Code 23324</p> <p>Purpose of Disbursement GOTV Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D32231</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.00"/></p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>   |  |   |

|  |  |  |
|--|--|--|
| <p><b>B. AlfredSmith</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 4647 Southwood Pwky</p> <p>City Richmond State VA Zip Code 23223</p> <p>Purpose of Disbursement GOTV Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D31879</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>   |  |  |

|   |  |  |
|---|--|--|
| <p><b>C. MaxGriffith</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Emmit Hall, UVA</p> <p>City Charlottesville State VA Zip Code 23093</p> <p>Purpose of Disbursement GOTV Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D32737</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>  |  |  |

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|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="200.00"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RogerWilliams</b>   |  | <b>Transaction ID: D32003</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 716 31st Street  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TimothyBrown</b>  |  | <b>Transaction ID: D32698</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1014 35th Street   |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Commonwealth of Virginia</b>  |  | <b>Transaction ID: D31691</b><br>Date of Disbursement<br>11 / 03 / 2006 |  |
| Mailing Address Department of Taxation<br>PO Box 658   |  | Amount of Each Disbursement this Period<br>636.41                       |  |
| City Richmond<br>State VA<br>Zip Code 23218  | Purpose of Disbursement<br>Payroll Taxes   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>716.41</b> |
| <b>TOTAL</b> 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 95 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Commonwealth of Virginia</b>  |  | <b>Transaction ID: D31778</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 2 2 / 2 0 0 6 |
| Mailing Address Department of Taxation<br>PO Box 658   |  | Amount of Each Disbursement this Period<br>622.04   |
| City Richmond State VA Zip Code 23218  | Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ConnieBryant</b>  |  | <b>Transaction ID: D32293</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1505 Ellington Sq.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Cleveland Kelly</b>   |  | <b>Transaction ID: D32657</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2103 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>40.00  |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 782.04 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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Democratic Party of Virginia

|  |  |   |  |
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| Full Name (Last, First, Middle Initial)<br><b>A. D&amp;P Printing &amp; Graphics, Inc.</b>   |  | <b>Transaction ID: D33128</b><br>Date of Disbursement<br>11 / 15 / 2006 |  |
| Mailing Address 5641 General Washington Dr # J   |  | Amount of Each Disbursement this Period<br>1104.60                      |  |
| City Alexandria<br>State VA<br>Zip Code 22312-2403   | Purpose of Disbursement<br>Exempt Candidate Mail/Kellam<br>Candidate Name  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TonyOby</b>   |  | <b>Transaction ID: D32725</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2316 Cecil Road  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MaxGriffith</b>   |  | <b>Transaction ID: D32084</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address Emmit Hall, UVA  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Charlottesville<br>State VA<br>Zip Code 23093   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1200.60     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |                             |   |                   |
|--|-----------------------------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. MaxGriffith</b>   |                             | <b>Transaction ID: D32195</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6   |                   |
| Mailing Address    Emmit Hall, UVA   |                             | Amount of Each Disbursement this Period<br>100.00   |                   |
| City<br>Charlottesville  | State<br>VA                 | Zip Code<br>23093   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |                             | Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name   |                             |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:            District: |   |                   |

|  |                             |   |                   |
|--|-----------------------------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Sheila Sanders</b>  |                             | <b>Transaction ID: D31729</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6   |                   |
| Mailing Address    143 Libbey St   |                             | Amount of Each Disbursement this Period<br>45.00  |                   |
| City<br>Hampton  | State<br>VA                 | Zip Code<br>23663   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Stipend  |                             | Disbursement For:    2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name   |                             |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:            District: |   |                   |

|  |                             |   |                   |
|--|-----------------------------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. StephanieFulgeon</b>  |                             | <b>Transaction ID: D32619</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6   |                   |
| Mailing Address    3029 Camelot Blvd.  |                             | Amount of Each Disbursement this Period<br>40.00  |                   |
| City<br>Chesapeake   | State<br>VA                 | Zip Code<br>23324   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |                             | Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name   |                             |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:            District: |   |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 185.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. KenneshaCherry</b>  |  | <b>Transaction ID: D31928</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 307 Lee Street<br>Apt A  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Newport News<br>State VA<br>Zip Code 23669  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MarcellusBrandon</b>  |  | <b>Transaction ID: D31814</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2125 Cool Lane   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond<br>State VA<br>Zip Code 23223  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Sharita Knight</b>  |  | <b>Transaction ID: D32243</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address P.O. Box 7813  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Norfolk<br>State VA<br>Zip Code 23324   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ClaireCoker</b>   |  | <b>Transaction ID: D32044</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. NiricoelClements</b>  |  | <b>Transaction ID: D32616</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2512 Moton Street  |  | Amount of Each Disbursement this Period<br>40.00  |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LatashaHarris</b>   |  | <b>Transaction ID: D31948</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1188 Jelos Place   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 176.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Kevin Perry</b>   |  | <b>Transaction ID: D32798</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 11270 Lamore Dr.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Disputana   | State VA Zip Code 23875  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. KiaMoore</b>  |  | <b>Transaction ID: D32251</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4533 West Norfolk Road   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AntinetteWhitehead</b>  |  | <b>Transaction ID: D32603</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 6060 College Drive   |  | Amount of Each Disbursement this Period<br>420.00   |
| City Suffolk   | State VA Zip Code 23434  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 600.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TiffanyGibbs</b>  |  | <b>Transaction ID: D32634</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5384 Hanyen Dr.  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TonyaRoebuck</b>  |  | <b>Transaction ID: D32517</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2446 Carmine St.   |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TishaSmith</b>  |  | <b>Transaction ID: D32507</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1718 Hodges Ferry Rd.  |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. LaQuayaMitts</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 528 H 21st Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31971</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>B. Strategic Services</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 6495 English Ivy Court<br>City Springfield State VA Zip Code 22152<br>Purpose of Disbursement Polling<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31648</b><br>Date of Disbursement<br>10 / 27 / 2006<br>Amount of Each Disbursement this Period<br>1975.00<br>Category/Type |
|--|--|--|

|   |  |   |
|---|--|---|
| <b>C. KeneethMoore</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 4533 West Norfolk Road<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32491</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>160.00<br>Category/Type |
|---|--|---|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2195.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BonitaFloyd</b>   |  | <b>Transaction ID: D31941</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1030 36th Street   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Scott Lipscomb</b>  |  | <b>Transaction ID: D32018</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1312 W. Cary St  |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. GelisaLewis</b>   |  | <b>Transaction ID: D31965</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 545A 21st Street   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 196.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Gelisa Lewis</b>  |  | <b>Transaction ID: D32429</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 545A 21st Street   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Patricia Williford</b>  |  | <b>Transaction ID: D32129</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1105 Mosby Street  |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Bernetta Walker</b>   |  | <b>Transaction ID: D32205</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3300 Bell Harbour Cir.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Suffolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 105 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. Drulisha Mitchell</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1021 Winward Road<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32249</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|   |  |  |
|---|--|--|
| <b>B. Andrew Hardy</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1121 35th Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31945</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|   |  |  |
|---|--|--|
| <b>C. Debora McCargo</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5000 Midlothian Turnpike Apt. 27<br>City Richmond State VA Zip Code 23224<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31861</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> 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 106 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LytonyaEchols</b>   |  | <b>Transaction ID: D32486</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address P.O. Box 7813  |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. NahjaePender</b>  |  | <b>Transaction ID: D31976</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 801 Lassiter Dr.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. EzraSanders</b>   |  | <b>Transaction ID: D32437</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 544 14th Street  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 107 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CameronSasnett</b>  |  | <b>Transaction ID: D32022</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1841 W. Grace Street   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Alphonso Dale</b>   |  | <b>Transaction ID: D32574</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1103 James Drive   |  | Amount of Each Disbursement this Period<br>240.00   |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CynthiaBanks</b>  |  | <b>Transaction ID: D32207</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3514 Bart Street   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 436.00 |
| <b>TOTAL</b> 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 108 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DeshiraThompson</b>   |  | <b>Transaction ID: D32272</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 6305 Dover Drive   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Suffolk   | State VA   |   |
| Zip Code 23324   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. RaashidaMuhammad</b>  |  | <b>Transaction ID: D31972</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1120 25th Street   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News  | State VA   |   |
| Zip Code 23607   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LijjiRedd</b>   |  | <b>Transaction ID: D31871</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2081 Creighton Rd.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond  | State VA   |   |
| Zip Code 23223   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> 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 109 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MichaelJohnson</b>  |  | <b>Transaction ID: D32360</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2533 Bethel St.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MichaelJohnson</b>  |  | <b>Transaction ID: D31796</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2533 Bethel St.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MichaelJohnson</b>  |  | <b>Transaction ID: D32039</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2533 Bethel St.  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>316.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box)   |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Andre Jackson</b>   |  | <b>Transaction ID: D32490</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1421 Sir-Kay Drive   |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Chesapeake  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. RandallWhitting</b>   |  | <b>Transaction ID: D32694</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2533 Bethel St.  |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DevonjaMclemore</b>   |  | <b>Transaction ID: D32071</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00                        |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00 |
| <b>TOTAL</b> 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 111 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Charlie Bryant</b>  |  | <b>Transaction ID: D32764</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 7041 Mamie Blvd.   |  | Amount of Each Disbursement this Period<br>40.00                        |
| City Norfolk   | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JoshuaWarren</b>  |  | <b>Transaction ID: D32277</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 973 Teal Ct.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Norfolk   | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Diane Alston</b>  |  | <b>Transaction ID: D32288</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2100 Effingham St.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 112 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DevinSmith</b>  |  | <b>Transaction ID: D32719</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DemondWarren</b>  |  | <b>Transaction ID: D32275</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 973 Teal Ct.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Flora Bell</b>  |  | <b>Transaction ID: D31810</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1031 N.31st St.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 113 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. John Walden</b>   |  | <b>Transaction ID: D32807</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 301 Oakhill Rd.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Petersburg<br>State VA<br>Zip Code 23805  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Meghan O'Brien</b>  |  | <b>Transaction ID: D32199</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 4217 Hawksley Dr.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Angel Whitehead</b>   |  | <b>Transaction ID: D32594</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3221 Dogwood Dr.   |  | Amount of Each Disbursement this Period<br>360.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23703  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 540.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 114 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ShameccaClyburn</b>   |  | <b>Transaction ID: D32401</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1706 Terminal Ave  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AlishaCooper</b>  |  | <b>Transaction ID: D32064</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JesseChadwick</b>   |  | <b>Transaction ID: D32082</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 13 Esther Ave  |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Ringoes<br>State NJ<br>Zip Code 8511  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 272.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....  |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CaitlinLewis</b>  |  | <b>Transaction ID: D32449</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1132 Chatmoss Drive  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23464  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Sandy Roane</b>   |  | <b>Transaction ID: D31873</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1710 Texas Ave   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. HelenPatterson</b>  |  | <b>Transaction ID: D32256</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 973 Teal Ct.   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 116 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. JosephWilliam</b>   |  | <b>Transaction ID: D31905</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2414 N 28th St.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Leigh AnneCollier</b>   |  | <b>Transaction ID: D32471</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2909 Susan Sheppard Ct   |  | Amount of Each Disbursement this Period<br>152.00                       |
| City Glen Allen  | State VA Zip Code 23060  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. SharrondaPorter</b>   |  | <b>Transaction ID: D32318</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address Tazewell Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 332.00 |
| <b>TOTAL</b> 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 117 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |   |  |   |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>LinwoodDeBrew</p> |   | <p><b>Transaction ID:</b> D32131<br/><b>Date of Disbursement</b><br/> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> |   | M     | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 0 | 7 | / | 2 | 0 | 0 | 6 |
| M  | M   | /  | D | D     | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 1  | 1   | /  | 0 | 7     | / | 2 | 0 | 0 | 6 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Mailing Address 2108 Marshall Ave</p>                                   |   | <p>Amount of Each Disbursement this Period<br/> <table border="1"> <tr> <td>80.00</td> </tr> </table> </p>   |   | 80.00 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 80.00  |   |  |   |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>City Newport News State VA Zip Code 23607</p>                           | <p>Purpose of Disbursement<br/>GOTV Worker</p>  | <p>Category/<br/>Type</p>  |   |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Candidate Name</p>  | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>                 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br/>                 State: District:</p> |  |   |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|   |   |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>BrendaKenney</p> |   | <p><b>Transaction ID:</b> D32364<br/><b>Date of Disbursement</b><br/> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> |   | M      | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 0 | 7 | / | 2 | 0 | 0 | 6 |
| M   | M   | /  | D | D      | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 1   | 1   | /  | 0 | 7      | / | 2 | 0 | 0 | 6 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Mailing Address 2378 Ambrose St.</p>                                   |   | <p>Amount of Each Disbursement this Period<br/> <table border="1"> <tr> <td>120.00</td> </tr> </table> </p>  |   | 120.00 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 120.00  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>City Richmond State VA Zip Code 23223</p>                              | <p>Purpose of Disbursement<br/>GOTV Worker</p>  | <p>Category/<br/>Type</p>  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Candidate Name</p>   | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>                 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br/>                 State: District:</p> |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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|--|---|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>LemoyneWilliams</p> |   | <p><b>Transaction ID:</b> D32035<br/><b>Date of Disbursement</b><br/> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> |   | M     | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 0 | 7 | / | 2 | 0 | 0 | 6 |
| M  | M   | /  | D | D     | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 1  | 1   | /  | 0 | 7     | / | 2 | 0 | 0 | 6 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Mailing Address 1500 N Lombardy St<br/>VUU</p>                            |   | <p>Amount of Each Disbursement this Period<br/> <table border="1"> <tr> <td>76.00</td> </tr> </table> </p>   |   | 76.00 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 76.00  |   |  |   |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>City Richmond State VA Zip Code 23220</p>                                 | <p>Purpose of Disbursement<br/>GOTV Worker</p>  | <p>Category/<br/>Type</p>  |   |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Candidate Name</p>  | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>                 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br/>                 State: District:</p> |  |   |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|   |               |
|---|---------------|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p>276.00</p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> |               |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RoyJenkins</b>  |  | <b>Transaction ID: D32462</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1262 16th Street   |  | Amount of Each Disbursement this Period<br>140.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ClevelandKelly</b>  |  | <b>Transaction ID: D32138</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2103 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Chic A Sea Restaurants Inc.</b>   |  | <b>Transaction ID: D31738</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 4400 Jefferson Avenue  |  | Amount of Each Disbursement this Period<br>622.17   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>Catering<br>Candidate Name  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 842.17      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 119 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MichaelWortham</b>  |  | <b>Transaction ID: D32163</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 68 Continental Drive   |  | Amount of Each Disbursement this Period<br>90.00  |  |
| City Hampton<br>State VA<br>Zip Code 23669   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JermonStokes</b>  |  | <b>Transaction ID: D32194</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 807 W. Broad Street  |  | Amount of Each Disbursement this Period<br>100.00   |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. EveleneCotman</b>   |  | <b>Transaction ID: D32346</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2122 Accomodation St.  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 310.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 120 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TakishaWilliams</b>   |  | <b>Transaction ID: D32099</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Daniel Mainor</b>   |  | <b>Transaction ID: D31601</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |
| Mailing Address 5828 Hedgerow Circle   |  | Amount of Each Disbursement this Period<br>200.00   |
| City Portsmouth State VA Zip Code 23703  | Purpose of Disbursement<br>Canvassing Stipend<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Daniel Mainor</b>   |  | <b>Transaction ID: D31714</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 5828 Hedgerow Circle   |  | Amount of Each Disbursement this Period<br>470.00   |
| City Portsmouth State VA Zip Code 23703  | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 746.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BrandiDuck</b>  |  | <b>Transaction ID: D32460</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 530 G 19th Street  |  | Amount of Each Disbursement this Period<br>140.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AntwaunGriffin</b>  |  | <b>Transaction ID: D32611</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address P.O. Box 27501   |  | Amount of Each Disbursement this Period<br>560.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23261  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. LisaMatthews</b>  |  | <b>Transaction ID: D32246</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 701 Nickoles Lane  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 820.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CurtisHuff</b>  |  | <b>Transaction ID: D31798</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 107 West Broad St.<br>Apt. 410   |  | Amount of Each Disbursement this Period<br>50.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CurtisHuff</b>  |  | <b>Transaction ID: D32739</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 107 West Broad St.<br>Apt. 410   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. KristenLeighton</b>   |  | <b>Transaction ID: D32010</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5801 Azalea Garden Rd.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Norfolk State VA Zip Code 23518   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 130.00 |
| <b>TOTAL</b> 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 123 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. OllieRaymond</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 4666 McHerrin Rd.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31870</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>B. ShirleyBridges</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 18 Brentwood Drive<br>City Hampton State VA Zip Code 23669<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32641</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>C. MikeDesantas</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 500 Frist Campus Center<br>City Princeton State NJ Zip Code 8544<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32727</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|--|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 120.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 124 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster</b>   |  | <b>Transaction ID:</b> D31642<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 2 5 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>27729.94  |
| City Merrifield State VA Zip Code 22081  | Category/<br>Type  |  |
| Purpose of Disbursement Postage-Exempt Candidate Mail/Webb   |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. US Postmaster</b>   |  | <b>Transaction ID:</b> D31644<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 2 6 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>5782.37   |
| City Merrifield State VA Zip Code 22081  | Category/<br>Type  |  |
| Purpose of Disbursement Postage for Sample Ballot  |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. US Postmaster</b>   |  | <b>Transaction ID:</b> D31677<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>15600.75  |
| City Merrifield State VA Zip Code 22081  | Category/<br>Type  |  |
| Purpose of Disbursement Exempt Candidate Mail Postage  |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 49113.06    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box] |

# 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 125 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster</b>   |  | <b>Transaction ID:</b> D31676<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>2128.19   |
| City Merrifield State VA Zip Code 22081  | Purpose of Disbursement<br>Exempt Candidate Mail Postage<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. US Postmaster</b>   |  | <b>Transaction ID:</b> D31675<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>903.13  |
| City Merrifield State VA Zip Code 22081  | Purpose of Disbursement<br>Exempt Candidate Mail Postage<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. US Postmaster</b>   |  | <b>Transaction ID:</b> D31674<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6 |
| Mailing Address Merrifield Postal Store  |  | Amount of Each Disbursement this Period<br>3770.63   |
| City Merrifield State VA Zip Code 22081  | Purpose of Disbursement<br>Exempt Candidate Mail Postage<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 6801.95     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 126 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. xpedex Stores Division</b>  |  | <b>Transaction ID:</b> D31773<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6 |
| Mailing Address PO Box 34748   |  | Amount of Each Disbursement this Period<br>437.15   |
| City Richmond  | State VA Zip Code 23234-0748   |   |
| Purpose of Disbursement<br>Office Supplies   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Anthem Health Keepers</b>   |  | <b>Transaction ID:</b> D31776<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 6 / 2 0 0 6 |
| Mailing Address PO Box 17499   |  | Amount of Each Disbursement this Period<br>2343.17  |
| City Baltimore   | State MD Zip Code 21297  |   |
| Purpose of Disbursement<br>Health Insurance  |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LawernceEpps</b>  |  | <b>Transaction ID:</b> D32407<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1511 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2900.32 |
| <b>TOTAL</b> 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 127 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. WilliamaeLewis</b>  |  | <b>Transaction ID: D32554</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 545A 21st Street   |  | Amount of Each Disbursement this Period<br>180.00   |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TenilleClyburn</b>  |  | <b>Transaction ID: D32667</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 531 19th Street Apt B  |  | Amount of Each Disbursement this Period<br>65.00  |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. GladysAlert</b>   |  | <b>Transaction ID: D31800</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2124 Crieghton Rd.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 305.00 |
| <b>TOTAL</b> 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 128 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. NelleReese</b>  |  | <b>Transaction ID: D31872</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2601 Kensington Ave.   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DerekHyman</b>  |  | <b>Transaction ID: D32527</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1333 28th Street   |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TieraGlover</b>   |  | <b>Transaction ID: D32304</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 5815 Frament Ave<br>Apt. 104   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____  |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MichaelMedley</b>   |  | <b>Transaction ID: D32058</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CharlieGarner</b>   |  | <b>Transaction ID: D32679</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2414 Maplewood Av  |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. NestaBelsches</b>   |  | <b>Transaction ID: D32340</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3077 Creighton Rd.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 216.00 |
| <b>TOTAL</b> 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 130 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. YolandaSmith</b>  |  | <b>Transaction ID: D31885</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2300 Magnolia St.  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JonahPerlin</b>   |  | <b>Transaction ID: D32097</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1639 Frist Campus Center   |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Princeton<br>State VA<br>Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. The Baughman Company</b>  |  | <b>Transaction ID: D31650</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 6 / 2 0 0 6 |  |
| Mailing Address 3106 Filmore St<br>2nd Floor   |  | Amount of Each Disbursement this Period<br>83012.00   |  |
| City San Francisco<br>State CA<br>Zip Code 94123   | Purpose of Disbursement<br>Exempt Candidate Mail/Kellam VA 6th   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 83148.00    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box] |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BethLewis</b>   |  | <b>Transaction ID: D32546</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1716 Terminal Ave  |  | Amount of Each Disbursement this Period<br>180.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JeffThondique</b>   |  | <b>Transaction ID: D32054</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NehretteWashington</b>  |  | <b>Transaction ID: D32520</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1102 Williamsburg Rd   |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Richmond<br>State VA<br>Zip Code 23231  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 416.00 |
| <b>TOTAL</b> 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 132 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. YillaSmith</b>  |  | <b>Transaction ID: D32506</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 649 E. Leicester Ave.<br>Apt. B9   |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. NormanRobinson</b>  |  | <b>Transaction ID: D32372</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1528 Coalter St.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. JamesDix</b>  |  | <b>Transaction ID: D32699</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 545 21st Street  |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Newport News State VA Zip Code 23602  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AshleyCabler</b>  |  | <b>Transaction ID: D32182</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>100.00   |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CurtisMitchell</b>  |  | <b>Transaction ID: D32248</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1021 Winward Road  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. PamelaGrarnette</b>   |  | <b>Transaction ID: D32721</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 8221 Whistler Road   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond State VA Zip Code 23227  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> 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 134 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DerrickLewis</b>  |  | <b>Transaction ID: D31964</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 545A 21st Street   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DerrickLewis</b>  |  | <b>Transaction ID: D32428</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 545A 21st Street   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JamesDix</b>  |  | <b>Transaction ID: D32132</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 545 21st Street  |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Newport News<br>State VA<br>Zip Code 23602  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00 |
| <b>TOTAL</b> 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 135 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BarbaraHarris</b>   |  | <b>Transaction ID: D32134</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 874 35th Street  |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Ke'eraGray</b>  |  | <b>Transaction ID: D32414</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5935 Marshall Ave  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JackieMartin</b>  |  | <b>Transaction ID: D32245</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3026 Camelot Blvd.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |
|---|--|---|
| <b>A. BrandonPoulson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 50 Tupelo Cir<br>City Hampton State VA Zip Code 23666<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32435</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

|   |  |  |
|---|--|--|
| <b>B. TobiasEstes</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 6096<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31831</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|   |  |   |
|---|--|---|
| <b>C. StewartAdams</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1128 Chisholm Cir.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32496</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>160.00<br>Category/Type |
|---|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 137 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DeshawnLewis</b>  |  | <b>Transaction ID: D32313</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 4513 Miles Ave.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Suffolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KeyonnaFleetwood</b>  |  | <b>Transaction ID: D32225</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 6435 Wellington Street   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. KenishiPickle</b>   |  | <b>Transaction ID: D32260</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3704 Elkhorn Ave., # A   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>360.00</b> |
| <b>TOTAL</b> 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 138 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Melvin DJohnson</b>   |  | <b>Transaction ID: D32240</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 508 Whitehaven Court   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ChristineMiller</b>   |  | <b>Transaction ID: D32463</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1322 22nd Street   |  | Amount of Each Disbursement this Period<br>140.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MikeDesantas</b>  |  | <b>Transaction ID: D32185</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 500 Frist Campus Center  |  | Amount of Each Disbursement this Period<br>100.00   |  |
| City Princeton<br>State NJ<br>Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00 |
| <b>TOTAL</b> 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 139 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BrittanyJonson</b>  |  | <b>Transaction ID: D32048</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TonishaReid</b>   |  | <b>Transaction ID: D32320</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1615 Darren Dr.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. JocieJarman</b>   |  | <b>Transaction ID: D32646</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 132 Garrett Drive  |  | Amount of Each Disbursement this Period<br>40.00  |
| City Hampton State VA Zip Code 23669   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 236.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. DaveRosen</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1829 Frist Campus Center<br>City Princeton State NJ Zip Code 8544<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32076</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|--|--|--|

|   |  |   |
|---|--|---|
| <b>B. DebraCleveland</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 316 Killian Ave.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32473</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>160.00<br>Category/Type |
|---|--|---|

|  |  |   |
|--|--|---|
| <b>C. AquirraLundy</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 104 Spring Forrest Ct. Apt. D<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32366</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>356.00</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ParisHudson</b>   |  | <b>Transaction ID: D32544</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 801 Lassiter Dr.   |  | Amount of Each Disbursement this Period<br>180.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Jessica Lee</b>   |  | <b>Transaction ID: D32164</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1319 Floyd Ave   |  | Amount of Each Disbursement this Period<br>100.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Kerbe Glenn</b>   |  | <b>Transaction ID: D32681</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2222 E. Cary St.   |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |
|---|--|---|
| <b>A. BryanJohnson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 303 London St.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31795</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

|   |  |   |
|---|--|---|
| <b>B. BryanJohnson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 303 London St.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32309</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

|  |  |  |
|--|--|--|
| <b>C. TroyJones</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 169 Mytilene Drive<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32137</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|--|--|--|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. OmarYacoubi</b>   |  | <b>Transaction ID: D32029</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 302 Goshen St, #104  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MoniqueFulgeon</b>  |  | <b>Transaction ID: D32229</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3029 Camelot Blvd.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AntoinetteHarris</b>  |  | <b>Transaction ID: D31946</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3017 Williams Street   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AmyReger</b>  |  | <b>Transaction ID: D31799</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 374 Lexington Road   |  | Amount of Each Disbursement this Period<br>50.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23226  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. RakimClark</b>  |  | <b>Transaction ID: D31823</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2905 2nd Ave.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DerekPollas</b>   |  | <b>Transaction ID: D32075</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1675 Frist Campus Center   |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Princeton<br>State NJ<br>Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>186.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box)   |

# 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 145 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DeborahWayland</b>  |  | <b>Transaction ID: D32149</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2313 B Westwood Ave.   |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Richmond<br>State VA<br>Zip Code 23230  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MinellMcClure</b>   |  | <b>Transaction ID: D32368</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1944 Redd St.  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. LavelleClyburn</b>  |  | <b>Transaction ID: D32537</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1137 Ivy Ave   |  | Amount of Each Disbursement this Period<br>180.00   |  |
| City Newport News<br>State VA<br>Zip Code 23601  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 380.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. James Minor</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 900 N 35th St<br>City Richmond State VA Zip Code 23223-7602<br>Purpose of Disbursement General Political Consulting<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31733</b><br>Date of Disbursement<br>11 / 04 / 2006<br>Amount of Each Disbursement this Period<br>2250.00<br>Category/Type |
|---|--|--|

|   |  |  |
|---|--|--|
| <b>B. RashadNeal</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 8221 Whistler Road<br>City Richmond State VA Zip Code 23227<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32061</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|---|--|--|

|   |  |   |
|---|--|---|
| <b>C. KevinRodwell-Simon</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 33C Continental Drive<br>City Hampton State VA Zip Code 23669<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32563</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>180.00<br>Category/Type |
|---|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2506.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 147 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Andrew Hoverman</b>   |  | <b>Transaction ID: D31752</b><br>Date of Disbursement<br>11 / 15 / 2006 |
| Mailing Address 12843 Mount Royal Lane   |  | Amount of Each Disbursement this Period<br>1500.00                      |
| City State Zip Code<br>Fairfax VA 22033  | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name<br>Category/Type |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |  |   |
| Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TamekaKnight</b>  |   | <b>Transaction ID: D32140</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 534 C 21st   |   | Amount of Each Disbursement this Period<br>80.00                        |
| City State Zip Code<br>Newport News VA 23607   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |   |   |
| Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TamekaKnight</b>  |   | <b>Transaction ID: D32139</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 534 C 21st   |   | Amount of Each Disbursement this Period<br>80.00                        |
| City State Zip Code<br>Newport News VA 23607   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |   |   |
| Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1660.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. JrickaBrane</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2601 Kensington Ave.<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31815</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>B. P. Wiliford</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1105 Mosby Street<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32695</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|---|--|--|

|   |  |   |
|---|--|---|
| <b>C. MonchelleLewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 545A 21st Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32550</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>180.00<br>Category/Type |
|---|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 149 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BrendaPatillo,Jr.</b>   |  | <b>Transaction ID: D32201</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 506 Roosevelt Blvd.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. RodnellRiddick</b>  |  | <b>Transaction ID: D32203</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2003 Stalham Rd.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JaredBarber</b>   |  | <b>Transaction ID: D32101</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 408A Dobson St.  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>316.00</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AnnieFant</b> |  | <b>Transaction ID: D32098</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2224 Staples Mill Road                         |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Richmond State VA Zip Code 23230                          | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:   | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TivernTurnbull</b> |  | <b>Transaction ID: D32470</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 139 Libbey Street                                   |  | Amount of Each Disbursement this Period<br>150.00   |  |
| City Hampton State VA Zip Code 23663                                | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. OtisDowtin</b> |  | <b>Transaction ID: D32632</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1718 Hodges Ferry Rd.                           |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Portsmouth State VA Zip Code 23324                         | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 266.00 |
| <b>TOTAL</b> 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 151 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Anastasia Waterfield</b>  |  | <b>Transaction ID: D31732</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 2628 Pender Dr   |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Cassandra Bulloa</b>  |  | <b>Transaction ID: D32106</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1604 N. 28th St  |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Casey Hare</b>  |  | <b>Transaction ID: D32008</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 611 Oleander Circle  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Virginia Beach<br>State VA<br>Zip Code 23464  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. KrystinaStephens</b>  |  | <b>Transaction ID: D32069</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ClevelandLove</b>   |  | <b>Transaction ID: D32197</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1311 E. Oceanview Ave.<br>Unit E3  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Elissa Harwood</b>  |  | <b>Transaction ID: D31719</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 808 Bishopsgate Lane   |  | Amount of Each Disbursement this Period<br>90.00  |
| City Virginia Beach State VA Zip Code 23452  | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 286.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>JasonHead   |  | <b>Transaction ID:</b> D32579<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2565 Ocone Shores  |  | Amount of Each Disbursement this Period<br>240.00  |
| City Virginia Beach State VA Zip Code 23545  | Purpose of Disbursement GOTV Worker<br>Candidate Name <input type="checkbox"/> Category/Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>JamieJones  |  | <b>Transaction ID:</b> D32136<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 902 Center Ave   |  | Amount of Each Disbursement this Period<br>80.00   |
| City Newport News State VA Zip Code 23605  | Purpose of Disbursement GOTV Worker<br>Candidate Name <input type="checkbox"/> Category/Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>SeanEvan  |  | <b>Transaction ID:</b> D31832<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2913 Haynes Ave.   |  | Amount of Each Disbursement this Period<br>60.00   |
| City Richmond State VA Zip Code 23222  | Purpose of Disbursement GOTV Worker<br>Candidate Name <input type="checkbox"/> Category/Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 380.00 |
| <b>TOTAL</b> 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 154 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Maurice Browder, Jr.</b>  |  | <b>Transaction ID: D31789</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 537 Cedar Rd.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Winning Directions</b>  |  | <b>Transaction ID: D31683</b><br>Date of Disbursement<br>11 / 02 / 2006 |  |
| Mailing Address 1366 San Mateo Avenue  |  | Amount of Each Disbursement this Period<br>6917.88                      |  |
| City South San Francisc<br>State CA<br>Zip Code 94080  | Purpose of Disbursement<br>GOTV Call Set-up<br>Candidate Name  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Destiny Warren</b>  |  | <b>Transaction ID: D32276</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 973 Teal Ct.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>7157.88</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RandallWhitting</b>   |  | <b>Transaction ID: D32126</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2533 Bethel St.  |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DeneshaFountain</b>   |  | <b>Transaction ID: D32678</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1909 Fairfield Ave.  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DarwinDuck</b>  |  | <b>Transaction ID: D32542</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address #2 28St Newport Towers   |  | Amount of Each Disbursement this Period<br>180.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 156 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. JamieMyers</b>  |  | <b>Transaction ID: D32024</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500N. Lombardy St<br>VUU  |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. L.Fousch</b>  |  | <b>Transaction ID: D32733</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3207 Appleford Drive   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Chester State VA Zip Code 23831   | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. NicoleBowser</b>  |  | <b>Transaction ID: D32290</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2726 High St.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 216.00 |
| <b>TOTAL</b> 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 157 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Nia Hutchinson</b>  |  | <b>Transaction ID: D32238</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5409 Berry Hill Road   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   |  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. AmandaHorton</b>  |  | <b>Transaction ID: D32237</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 900 Darin Drive  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  |  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CierraHamilton</b>  |  | <b>Transaction ID: D31839</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2354 Fairfield Dr.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  |  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 158 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DevinWilliams</b>   |  | <b>Transaction ID: D32388</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 209 Fairfield Ave.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SimoneDreher</b>  |  | <b>Transaction ID: D32643</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 143 Town Sq Drive  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DariusParker</b>  |  | <b>Transaction ID: D32181</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 723 Holbein Place  |  | Amount of Each Disbursement this Period<br>100.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23225  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 159 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ShawntaReid</b>   |  | <b>Transaction ID: D32321</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 125 Dale Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JulienEley</b>  |  | <b>Transaction ID: D31939</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 839 25th Street  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PatriciaMedley</b>  |  | <b>Transaction ID: D32765</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 538 22nd Street<br>Apt H   |  | Amount of Each Disbursement this Period<br>65.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 245.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 160 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ChrisMorton</b>   |   | <b>Transaction ID: D32096</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address 1507 Frist Campus Center   |   | Amount of Each Disbursement this Period<br>76.00   |
| City Princeton State Va Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BenEaster</b>   |   | <b>Transaction ID: D32186</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address Frist Campus Center  |   | Amount of Each Disbursement this Period<br>100.00  |
| City Princeton State NJ Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JoeWiggins</b>  |   | <b>Transaction ID: D32577</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address 1253 36 Street   |   | Amount of Each Disbursement this Period<br>240.00  |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 416.00 |
| <b>TOTAL</b> 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 161 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Leroy Jackson</b>   |  | <b>Transaction ID: D31955</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 4806 Madison Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Vanessa Gladney</b>   |  | <b>Transaction ID: D32302</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 517 Taft Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Michael Hyman</b>   |  | <b>Transaction ID: D32117</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1805 Q st.   |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00 |
| <b>TOTAL</b> 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 162 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. RandyJeter</b>  |  | <b>Transaction ID: D31957</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2115 Madison Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. KentaeDavis</b>   |  | <b>Transaction ID: D32677</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2354 Fairfield Ave.  |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. HadishaGordon</b>   |  | <b>Transaction ID: D32582</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 143 Libbey Street  |  | Amount of Each Disbursement this Period<br>270.00                       |
| City Hampton   | State VA Zip Code 23663  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 350.00 |
| <b>TOTAL</b> 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 163 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. GingerHouck</b>   |  | <b>Transaction ID: D32028</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1709 Lakeview Ave  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. RogerThomas</b>   |  | <b>Transaction ID: D31892</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1907 Whitcomb St.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. LonnieAnderson</b>  |  | <b>Transaction ID: D31801</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3136 Nine Mile Rd.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 196.00 |
| <b>TOTAL</b> 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 164 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MarquisBarrett</b>  |  | <b>Transaction ID: D32392</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 642 27th Street  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TmothyWashington</b>  |  | <b>Transaction ID: D31996</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 635 - 50th Street  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BarbaraCarter</b>   |  | <b>Transaction ID: D32743</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3500 Deleware Ave.   |  | Amount of Each Disbursement this Period<br>40.00  |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 165 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Taryan Scott</b>  |  | <b>Transaction ID: D32440</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1808 Terminal Ave  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MyiaFrancis</b>   |  | <b>Transaction ID: D32352</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4910 Greenleigh Rd.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TracySikes</b>  |  | <b>Transaction ID: D32324</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1131 Georgetown Rd.<br>Apt. 104  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk   | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00 |
| <b>TOTAL</b> 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 166 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TorrieCook</b>  |  | <b>Transaction ID: D32172</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>100.00                       |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DevinSmith</b>  |  | <b>Transaction ID: D32177</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>100.00                       |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AthenaPhelps</b>  |  | <b>Transaction ID: D32607</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 523 Hyde Park Rd.  |  | Amount of Each Disbursement this Period<br>450.00                       |
| City Norfolk State VA Zip Code 23503   | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 650.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |          |   |                   |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. MickeyHubbard</b>   |          | <b>Transaction ID: D31848</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 1617 Gay St.   |          | Amount of Each Disbursement this Period<br>60.00                        |                   |
| City Richmond  | State VA | Zip Code 23223  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |          | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |          |   |                   |
| Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          |   |                   |

|  |          |   |                   |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. QuianaJohnson</b>   |          | <b>Transaction ID: D32474</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 1217 Seaboard Ave.   |          | Amount of Each Disbursement this Period<br>160.00                       |                   |
| City Chesapeake  | State VA | Zip Code 23324  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |          | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |          |   |                   |
| Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          |   |                   |

|  |          |   |                   |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Jarnice Walker</b>  |          | <b>Transaction ID: D32803</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 710 South Park Dr.   |          | Amount of Each Disbursement this Period<br>60.00                        |                   |
| City Petersburg  | State VA | Zip Code 23805  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |          | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |          |   |                   |
| Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          |   |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Annette Gill</b> |  | <b>Transaction ID: D32113</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1516 Coalter St.                                  |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223                       | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JoeyWood</b> |  | <b>Transaction ID: D32021</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2302 Dolfield Dr                              |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23235                   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Rha'ShawnCotton</b> |  | <b>Transaction ID: D31930</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 655 43rd Street                                      |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607                      | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:   | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 216.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AshleyCarroll</b>   |  | <b>Transaction ID: D31927</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1052 Garden Drive  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MontezLewis</b>   |  | <b>Transaction ID: D32551</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1716 Terminal Ave  |  | Amount of Each Disbursement this Period<br>180.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CarltonCarroll</b>  |  | <b>Transaction ID: D32742</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2613 Edgewood Ave.   |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23222  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KatelynBrownlee</b>   |  | <b>Transaction ID: D31924</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 200 Majestic Ct. Apt 301   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23606  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Sara Dean</b>   |  | <b>Transaction ID: D31590</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 2084 Schubert Dr   |  | Amount of Each Disbursement this Period<br>100.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23554  | Purpose of Disbursement<br>Canvassing Stipend<br>Candidate Name<br>Category/Type   |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Sara Dean</b>   |  | <b>Transaction ID: D31704</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 2084 Schubert Dr   |  | Amount of Each Disbursement this Period<br>190.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23554  | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name<br>Category/Type   |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 350.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TimothyDuck</b>   |  | <b>Transaction ID: D32406</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1014 35th Street   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ChennelleCook</b>   |  | <b>Transaction ID: D31824</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2106 Accomodation St.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ArchieEdwards</b>   |  | <b>Transaction ID: D32589</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1627 Wingfield Drive   |  | Amount of Each Disbursement this Period<br>320.00                       |  |
| City Hampton<br>State VA<br>Zip Code 23661   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 500.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. EdithBell</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1430 Harbor Lane<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32393</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|   |  |   |
|---|--|---|
| <b>B. KierraFleetwood</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 6435 Wellington Street<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32224</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

|  |  |  |
|--|--|--|
| <b>C. ShirleyDavis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2354 Fairfield Ave.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32744</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|--|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KwamaneGlasco</b>   |   | <b>Transaction ID: D32412</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address #2 28 St. West Ave Apt 7-D   |   | Amount of Each Disbursement this Period<br>120.00  |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CassandraBulloa</b>   |   | <b>Transaction ID: D32673</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address 1604 N. 28th St  |   | Amount of Each Disbursement this Period<br>20.00   |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Wampold Strategies</b>  |  | <b>Transaction ID: D31641</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 5 / 2 0 0 6  |
| Mailing Address 216 11th St SE   |  | Amount of Each Disbursement this Period<br>44622.60  |
| City Washington State DC Zip Code 20003  | Purpose of Disbursement<br>Exempt Candidate Mail/Webb VA Senate<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 44762.60    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Landmark Strategies, Inc.</b>   |  | <b>Transaction ID: D31643</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 6 / 2 0 0 6  |
| Mailing Address 1029 N Royal St Ste 350  |  | Amount of Each Disbursement this Period<br>75000.00  |
| City Alexandria State VA Zip Code 22314-5508   | Purpose of Disbursement<br>Voter ID Calls<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Landmark Strategies, Inc.</b>   |  | <b>Transaction ID: D33127</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 3 0 / 2 0 0 6  |
| Mailing Address 1029 N Royal St Ste 350  |  | Amount of Each Disbursement this Period<br>80000.00  |
| City Alexandria State VA Zip Code 22314-5508   | Purpose of Disbursement<br>Voter ID Calls<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MatthewHarris</b>   |   | <b>Transaction ID: D32418</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address 637 Milford Ave  |   | Amount of Each Disbursement this Period<br>120.00  |
| City Hampton State VA Zip Code 23661   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 155120.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. GiovanniWiliford</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1714 Jacquelyn St.<br>City Richmond State VA Zip Code 23222<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31901</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>B. WilliamBryant</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1212 32nd Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31926</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>C. TajahMitchell</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1021 Winward Road<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32250</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ShirleyDavis</b>  |  | <b>Transaction ID: D32512</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2354 Fairfield Ave.  |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. NatalieClark</b>  |  | <b>Transaction ID: D32675</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 7123 Polegreen Rd.   |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CardellPatillo,Jr.</b>  |  | <b>Transaction ID: D32476</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 506 Roosevelt Blvd.  |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. JevinKinard</b>   |  | <b>Transaction ID: D32040</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N Lombardy St<br>VUU  |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Monika Lucas</b>  |  | <b>Transaction ID: D32023</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 8358 Walnut Grove Road   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Mechanicsville State VA Zip Code 23111  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. NichelleBrown</b>   |  | <b>Transaction ID: D32212</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 900 Darin Drive  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 272.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PatriciaMedley</b>  |  | <b>Transaction ID: D32528</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 538 22nd Street<br>Apt H   |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Newport News<br>State VA<br>Zip Code 23607  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. QianaArmstead</b>   |  | <b>Transaction ID: D31803</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 6207 Checkerberry Dr.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond<br>State VA<br>Zip Code 23231  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. QuinshawnSmith</b>  |  | <b>Transaction ID: D31882</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1935 Repp Circle   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Highland Springs<br>State VA<br>Zip Code 23075  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mary Artis</b>  |  | <b>Transaction ID: D32336</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1430 Mechanicsville Tpk.   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JovanCurry</b>  |  | <b>Transaction ID: D31828</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2601 Kensington Ave.   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fuse Inc</b>  |  | <b>Transaction ID: D31606</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 802 North First St   |  | Amount of Each Disbursement this Period<br>40000.00   |  |
| City Saint Louis<br>State MO<br>Zip Code 63102   | Purpose of Disbursement<br>Generic GOTV Radio  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>40180.00</b> |
| <b>TOTAL</b> 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 180 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Fuse Inc</b>  |  | <b>Transaction ID: D31692</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 802 North First St   |  | Amount of Each Disbursement this Period<br>13500.00   |
| City Saint Louis   | State MO   |   |
| Zip Code 63102   |  |   |
| Purpose of Disbursement<br>Generic GOTV Radio  |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TonyClark</b>   |  | <b>Transaction ID: D32483</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4240 Sedgewyck Circle  |  | Amount of Each Disbursement this Period<br>160.00   |
| City Portsmouth  | State VA   |   |
| Zip Code 23324   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DebraJohnson</b>  |  | <b>Transaction ID: D31797</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4508 Plumstead Dr.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Va. Beach   | State VA   |   |
| Zip Code 23324   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 13780.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Marilyn Taylor</b>  |  | <b>Transaction ID: D32750</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 103 South Lake Ave.  |  | Amount of Each Disbursement this Period<br>40.00  |
| City Richmond State VA Zip Code 23223  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TroyJones</b>   |  | <b>Transaction ID: D32655</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 169 Mytilene Drive   |  | Amount of Each Disbursement this Period<br>40.00  |
| City Newport News State VA Zip Code 23607  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. JamesMinor</b>  |  | <b>Transaction ID: D32659</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 900 N. 35th Street   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 140.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>JazmineElliott  |  | <b>Transaction ID:</b> D32298<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3400 Brandywine Dr.  |  | Amount of Each Disbursement this Period<br>120.00  |
| City Chesapeake State VA Zip Code 23324  | Category/<br>Type  |  |
| Purpose of Disbursement<br>GOTV Worker   |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>MarcoMatos  |  | <b>Transaction ID:</b> D32100<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1536 Frist Campus Center   |  | Amount of Each Disbursement this Period<br>76.00   |
| City Princeton State VA Zip Code 8544  | Category/<br>Type  |  |
| Purpose of Disbursement<br>GOTV Worker   |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>L.Fousch  |  | <b>Transaction ID:</b> D32191<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3207 Appleford Drive   |  | Amount of Each Disbursement this Period<br>100.00  |
| City Chester State VA Zip Code 23831   | Category/<br>Type  |  |
| Purpose of Disbursement<br>GOTV Worker   |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 296.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MSHC Partners, Inc</b>  |  | <b>Transaction ID: D31634</b><br>Date of Disbursement<br>10 / 24 / 2006 |
| Mailing Address 1101 14th St NW<br>3rd Floor   |  | Amount of Each Disbursement this Period<br>2055.00                      |
| City Washington State DC Zip Code 20005  | Purpose of Disbursement<br>Generic GOTV Direct Mail Production<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JamieWashington</b>   |  | <b>Transaction ID: D31897</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3122 N. 29th St.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. EvelynRobinson</b>  |  | <b>Transaction ID: D32124</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3413 N. 21st St.   |  | Amount of Each Disbursement this Period<br>80.00                        |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 20690.00    |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. JoanClaiborne</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 548 19th Street Apt B<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31929</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|   |  |  |
|---|--|--|
| <b>B. JourdanPeters</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1307 Hampton Blvd.<br>City Norfolk State VA Zip Code 23517<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32161</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>90.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>C. TyrhenWilliams</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 106 Whimbrel Drive<br>City Suffolk State VA Zip Code 23435<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32004</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 210.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KaliarshaWashington</b>   |  | <b>Transaction ID: D31898</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 521 Mosby St.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ShonaBoyd</b>   |  | <b>Transaction ID: D31787</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 316 Killian Ave.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NatiliaJohnson</b>  |  | <b>Transaction ID: D32361</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1307 St. John Street #B  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. DariusParker</b>   |                  | <b>Transaction ID: D32723</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 723 Holbein Place   |                  | Amount of Each Disbursement this Period<br>20.00   |                   |
| City Richmond   | State VA         | Zip Code 23225   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. DannyPlaugher</b>  |                  | <b>Transaction ID: D32738</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 1113 Grove Ave.<br>#3   |                  | Amount of Each Disbursement this Period<br>20.00   |                   |
| City Richmond   | State VA         | Zip Code 23220   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. AngelaHarris</b>   |                  | <b>Transaction ID: D32526</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 3017 Williams St.   |                  | Amount of Each Disbursement this Period<br>160.00  |                   |
| City Newport News   | State VA         | Zip Code 23607   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | 200.00 |

**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 187 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. EWilliams</b>   |  | <b>Transaction ID: D32000</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 106 Whimbrel Drive   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Suffolk State VA Zip Code 23435   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DeneshaFountain</b>   |  | <b>Transaction ID: D32111</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1909 Fairfield Ave.  |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ThadtigussLews</b>  |  | <b>Transaction ID: D32144</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 545 A - 21st St  |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. Annette Gill</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1516 Coalter St.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32680</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>B. Jessica Lee</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1319 Floyd Ave<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32649</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>C. Xavier Lewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 544 22nd St<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31968</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 120.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 189 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RikkiCarter</b>   |  | <b>Transaction ID: D31820</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3500 Deleware Ave.   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Jourdan Peters</b>  |  | <b>Transaction ID: D31602</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 1307 Hampton Blvd  |  | Amount of Each Disbursement this Period<br>140.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23517   | Purpose of Disbursement<br>Canvassing Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Jourdan Peters</b>  |  | <b>Transaction ID: D31730</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 1307 Hampton Blvd  |  | Amount of Each Disbursement this Period<br>230.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23517   | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 430.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Blanche Saunders</b>  |  | <b>Transaction ID: D32665</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 208 Wynn Street  |  | Amount of Each Disbursement this Period<br>65.00                        |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TywainMann</b>  |  | <b>Transaction ID: D31860</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1807 Q Street  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. RashikaMurphy</b>   |  | <b>Transaction ID: D32253</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 771 West 51st Street   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Norfolk   | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 245.00 |
| <b>TOTAL</b> 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 191 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. NadariousClark</b>  |  | <b>Transaction ID: D32217</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 4240 Sedgewyck Circle  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AliciaLove</b>  |  | <b>Transaction ID: D32475</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1419 Mellwood Ct.  |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RashedaCaleb</b>  |  | <b>Transaction ID: D31819</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1713 Texas Ave.  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00 |
| <b>TOTAL</b> 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 192 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. SonyaLewis</b>  |  | <b>Transaction ID: D32504</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 103 Navajo Trail   |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MarquieRobinson</b>   |  | <b>Transaction ID: D32322</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3400 Brandywine Dr.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DonnaThornton</b>   |  | <b>Transaction ID: D32647</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 830 27th Street  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00 |
| <b>TOTAL</b> 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 193 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LinwoodDeBrew</b>   |  | <b>Transaction ID: D32773</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2108 Marshall Ave  |  | Amount of Each Disbursement this Period<br>65.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AnthonyHarris</b>   |  | <b>Transaction ID: D32416</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3017 Williams St   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BriannaScott</b>  |  | <b>Transaction ID: D31983</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1808 Terminal Ave  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 245.00 |
| <b>TOTAL</b> 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 194 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. RashayMorris</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 206 Baker St.<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31864</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>B. SonyaLewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 103 Navajo Trail<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32635</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>C. Tracy Pickle</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3704 Elkhorn Ave., # A<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32625</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|--|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 140.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 195 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. StephanyJenson</b>  |  | <b>Transaction ID: D32448</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 721 Maralon Drive  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Virginia Beach  | State VA Zip Code 23464  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Tom A Anstrom</b>   |  | <b>Transaction ID: D31734</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 517 Mowbray Arch   |  | Amount of Each Disbursement this Period<br>1500.00  |
| City Norfolk   | State VA Zip Code 23507-2134   |   |
| Purpose of Disbursement<br>General Political Consulting  |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. JanetLewis</b>  |  | <b>Transaction ID: D32171</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2719 Henrico Dr  |  | Amount of Each Disbursement this Period<br>100.00   |
| City Richmond  | State VA Zip Code 23222  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1720.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. ShanayLeach</b>  |                  | <b>Transaction ID: D31857</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 2513 Warwick Rd.  |                  | Amount of Each Disbursement this Period<br>60.00   |                   |
| City Richmond   | State VA         | Zip Code 23224   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. ArchieEdwards</b>  |                  | <b>Transaction ID: D32663</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 1627 Wingfield Drive  |                  | Amount of Each Disbursement this Period<br>65.00   |                   |
| City Hampton  | State VA         | Zip Code 23661   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. CorinaTyree-Williams</b>   |                  | <b>Transaction ID: D32274</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 3642 Sharpley Lane  |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Norfolk  | State VA         | Zip Code 23324   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 245.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. TiaraJohnson</b>  |  | <b>Transaction ID: D32363</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 2553 Bethel St.  |  | Amount of Each Disbursement this Period<br>120.00                       |                   |
| City Richmond  | State VA   | Zip Code 23223  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |  |   |                   |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. David Russell</b>   |  | <b>Transaction ID: D31698</b><br>Date of Disbursement<br>11 / 03 / 2006 |                   |
| Mailing Address 1811 Marshall Ave  |  | Amount of Each Disbursement this Period<br>1500.00                      |                   |
| City Newport News  | State VA   | Zip Code 23607  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Stipend  |  |   |                   |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. TamekaKnight</b>  |  | <b>Transaction ID: D32704</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 534 C 21st   |  | Amount of Each Disbursement this Period<br>20.00                        |                   |
| City Newport News  | State VA   | Zip Code 23607  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker   |  |   |                   |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1640.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TamekaKnight</b>  |  | <b>Transaction ID: D32703</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 534 C 21st   |  | Amount of Each Disbursement this Period<br>20.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Elizabeth Pearson</b>   |  | <b>Transaction ID: D31659</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 3 0 / 2 0 0 6 |  |
| Mailing Address 1701 16th St NW<br>Apt 363   |  | Amount of Each Disbursement this Period<br>1452.65  |  |
| City Washington<br>State DC<br>Zip Code 20009-3115   | Purpose of Disbursement<br>Payroll   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Elizabeth Pearson</b>   |  | <b>Transaction ID: D31746</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 4 / 2 0 0 6 |  |
| Mailing Address 1701 16th St NW<br>Apt 363   |  | Amount of Each Disbursement this Period<br>1452.65  |  |
| City Washington<br>State DC<br>Zip Code 20009-3115   | Purpose of Disbursement<br>Payroll   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2925.30 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Elizabeth Pearson</b>   |  | <b>Transaction ID: D31783</b><br>Date of Disbursement<br>11 / 27 / 2006 |
| Mailing Address 1701 16th St NW<br>Apt 363   |  | Amount of Each Disbursement this Period<br>238.61                       |
| City Washington State DC Zip Code 20009-3115   | Purpose of Disbursement Expense Reimbursement<br>Candidate Name <input type="checkbox"/> Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SherrieHenry</b>  |  | <b>Transaction ID: D32027</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00                        |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement GOTV Worker<br>Candidate Name <input type="checkbox"/> Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ChristinaBanks</b>  |  | <b>Transaction ID: D32523</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2200 Orcutt Ave  |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement GOTV Worker<br>Candidate Name <input type="checkbox"/> Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 474.61 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Levar M Stoney</b>  |  | <b>Transaction ID: D31662</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 3 0 / 2 0 0 6 |
| Mailing Address 4012 Forest Hill Ave.<br>APT 18  |  | Amount of Each Disbursement this Period<br>1264.28  |
| City Richmond State VA Zip Code 23225  | Purpose of Disbursement<br>Payroll   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Levar M Stoney</b>  |  | <b>Transaction ID: D31750</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 4 / 2 0 0 6 |
| Mailing Address 4012 Forest Hill Ave.<br>APT 18  |  | Amount of Each Disbursement this Period<br>1264.28  |
| City Richmond State VA Zip Code 23225  | Purpose of Disbursement<br>Payroll   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Aashja Taylor</b>   |  | <b>Transaction ID: D32049</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3131 Edgewood Ave  |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23222  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2604.56 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TalibaBoone</b>   |  | <b>Transaction ID: D32557</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2601 Corprew Ave.  |  | Amount of Each Disbursement this Period<br>180.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23504   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ShondaRobinson</b>  |  | <b>Transaction ID: D32760</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2003 Stalham Rd.   |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Mary AnnRichardson</b>  |  | <b>Transaction ID: D32264</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 7041 Mamie Blvd.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. EugeneBarfield</b>  |  | <b>Transaction ID: D32337</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2215 Fenton St   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Richmond  | State VA Zip Code 23231  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BarbaraHarris</b>   |  | <b>Transaction ID: D32701</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 874 35th Street  |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TorrieCook</b>  |  | <b>Transaction ID: D32716</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 160.00 |
| <b>TOTAL</b> 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 203 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. IshmaelDaniel</b>   |  | <b>Transaction ID: D31829</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2514 Bethel St.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JamesWest</b>   |  | <b>Transaction ID: D32327</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5815 Frament Ave<br>Apt. 104   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. KristineJones</b>   |  | <b>Transaction ID: D32094</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 312 E. Broad Street  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23219  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00 |
| <b>TOTAL</b> 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 204 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |
|---|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Latice Wilikerson<br>Mailing Address 1952 Redd Street<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                  |  | <b>Transaction ID:</b> D32522<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>160.00 |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Micah Knight<br>Mailing Address 701 Austin Ct<br>APT D<br>City Newport News State VA Zip Code 23605-2790<br>Purpose of Disbursement Canvassing Stipend<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID:</b> D31586<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>510.00 |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Micah Knight<br>Mailing Address 701 Austin Ct<br>APT D<br>City Newport News State VA Zip Code 23605-2790<br>Purpose of Disbursement GOTV Stipend<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼       |  | <b>Transaction ID:</b> D31700<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 3 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>495.00 |

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1165.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KimRobinson</b>   |  | <b>Transaction ID: D31874</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2601 Kensington Ave.   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MichelleWarren</b>  |  | <b>Transaction ID: D31995</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 749 36th Street Apt 4  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. FrankMuhammad</b>   |  | <b>Transaction ID: D32767</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 255 - B Union Street Apt B   |  | Amount of Each Disbursement this Period<br>65.00  |  |
| City Hampton<br>State VA<br>Zip Code 23669   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 185.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 206 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. LevarStoney</b>   |  | <b>Transaction ID: D32587</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4012 Forrest Hill Ave.<br>Apt. 18  |  | Amount of Each Disbursement this Period<br>300.00   |
| City Richmond State VA Zip Code 23225  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BreannaFutrell</b>  |  | <b>Transaction ID: D32411</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 50 Tupelo Cir  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Hampton State VA Zip Code 23666   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. FayeShaw</b>  |  | <b>Transaction ID: D31986</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1567 Winthrope Drive   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 480.00 |
| <b>TOTAL</b> 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 207 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. PercyHaney</b>  |  | <b>Transaction ID: D31944</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1030 36th Street   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CharmaineForeman</b>  |  | <b>Transaction ID: D32226</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2322 Rush Street   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Leon DHutchinson</b>  |  | <b>Transaction ID: D32621</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 729 Greenwing Drive  |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Bryan Taylor</b>  |  | <b>Transaction ID: D31724</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 443 Maryland Ave   |  | Amount of Each Disbursement this Period<br>45.00  |  |
| City Norfolk<br>State VA<br>Zip Code 23508   | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Dawayne Jackson</b>   |  | <b>Transaction ID: D32425</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 625 35th Street  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Robin Lee</b>   |  | <b>Transaction ID: D32706</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 50 Tupelo Circle   |  | Amount of Each Disbursement this Period<br>20.00  |  |
| City Hampton<br>State VA<br>Zip Code 23666   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 185.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Antonio Mitchell</b>  |  | <b>Transaction ID: D32247</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1021 Winward Road  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Taron Stubbs</b>  |  | <b>Transaction ID: D32169</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N Lombardy St VUU   |  | Amount of Each Disbursement this Period<br>100.00   |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Laurie Wallmark</b>   |  | <b>Transaction ID: D32731</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1 Country Club Drive   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Ringoes State NJ Zip Code 8511  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> 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 210 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CharlesBoswell</b>  |  | <b>Transaction ID: D32394</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1808 Terminal Ave  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ThomasCunningham</b>  |  | <b>Transaction ID: D31931</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 801 Lassiter Dr.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. KeithWilliams</b>   |  | <b>Transaction ID: D32002</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 539 G - 19th Street  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 211 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KeishaScott</b>   |  | <b>Transaction ID: D32692</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2003 Beck Drive  |  | Amount of Each Disbursement this Period<br>20.00  |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AnnetteBryant</b>   |  | <b>Transaction ID: D32763</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 7041 Mamie Blvd.   |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Blanche Saunders</b>  |  | <b>Transaction ID: D32494</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 208 Wynn Street  |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....  |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CourtneyMcCay</b>   |  | <b>Transaction ID: D32726</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MarilynBailey</b>   |  | <b>Transaction ID: D31805</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1524 Coalter St.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. SylviaPoindexter</b>  |  | <b>Transaction ID: D32690</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2821 Poindexter Street   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 100.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. SylviaPoindexter</b>  |  | <b>Transaction ID: D32689</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2821 Poindexter Street   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond State VA Zip Code 23223  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DannyPlaugher</b>   |  | <b>Transaction ID: D32196</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1113 Grove Ave. #3   |  | Amount of Each Disbursement this Period<br>100.00   |
| City Richmond State VA Zip Code 23220  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. PhyllisLevisy</b>   |  | <b>Transaction ID: D32707</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5709 Surray Ave  |  | Amount of Each Disbursement this Period<br>20.00  |
| City Newport News State VA Zip Code 23607  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 140.00 |
| <b>TOTAL</b> 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 214 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Evelyn Thomas</b>   |  | <b>Transaction ID: D32383</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1907 Whitcomb St.  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kenneth Moore, Jr.</b>  |  | <b>Transaction ID: D32252</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 4533 West Norfolk Road   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Anthony Martin</b>  |  | <b>Transaction ID: D31969</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 638 Ridley Circle  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DesmondBrown</b>  |  | <b>Transaction ID: D31921</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 655 Ridley Circle  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JazminColeman</b>   |  | <b>Transaction ID: D32297</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 808 Bold St.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DarrionKeeling</b>  |  | <b>Transaction ID: D32242</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 7856 Woodall Rd.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk   | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Spondella Wiliford</b>  |  | <b>Transaction ID: D32521</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1714 Jacquelin St.   |  | Amount of Each Disbursement this Period<br>160.00   |
| City Richmond  | State VA   |   |
| Zip Code 23223   | Category/Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Eric Flemming</b>   |  | <b>Transaction ID: D31743</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 1324 Five Point Rd   |  | Amount of Each Disbursement this Period<br>1300.00  |
| City Virginia Beach  | State VA   |   |
| Zip Code 23454   | Category/Type  |   |
| Purpose of Disbursement<br>Data Management Consulting  |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Eric Flemming</b>   |  | <b>Transaction ID: D31768</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6 |
| Mailing Address 1324 Five Point Rd   |  | Amount of Each Disbursement this Period<br>1300.00  |
| City Virginia Beach  | State VA   |   |
| Zip Code 23454   | Category/Type  |   |
| Purpose of Disbursement<br>Data Management Consulting  |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2760.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. FrankMuhammad</b>   |  | <b>Transaction ID: D32146</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 255 - B Union Street<br>Apt B  |  | Amount of Each Disbursement this Period<br>80.00  |
| City Hampton State VA Zip Code 23669   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SheliaBowser</b>  |  | <b>Transaction ID: D32497</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2726 High St.  |  | Amount of Each Disbursement this Period<br>160.00   |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ByronLevisy</b>   |  | <b>Transaction ID: D31963</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5709 Surray Ave  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MicahScott</b>  |  | <b>Transaction ID: D32268</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 7041 Mamie Blvd.   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MiceiaHunter</b>  |  | <b>Transaction ID: D31953</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 97 F 28th Street   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TerahJohnson</b>  |  | <b>Transaction ID: D32720</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2921 Hilliard Rd   |  | Amount of Each Disbursement this Period<br>20.00  |  |
| City Richmond<br>State VA<br>Zip Code 23228  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Patricia Jackson</b>  |  | <b>Transaction ID: D31851</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2023 Accomodation St.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Larry Adams</b>   |  | <b>Transaction ID: D32285</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1130 Chisholm Cir.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Lemont Lewis</b>  |  | <b>Transaction ID: D32566</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 544 C - 22nd St  |  | Amount of Each Disbursement this Period<br>200.00                       |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>380.00</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. LateishaScott</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2345 Selden St.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31875</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |  |   |
|--|--|---|
| <b>B. DanielMainor</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5828 Hedgerow Cir<br>City Portsmouth State VA Zip Code 23703<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32592</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>360.00<br>Category/Type |
|--|--|---|

|   |  |  |
|---|--|--|
| <b>C. TevinPhillips</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3405 E. Broad Rock Rd<br>City Richmond State VA Zip Code 23224<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31867</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 480.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. PhyllisLevisy</b>   |  | <b>Transaction ID: D32143</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 5709 Surray Ave  |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MiriamMainor</b>  |  | <b>Transaction ID: D32158</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 5828 Hedgeron Circle   |  | Amount of Each Disbursement this Period<br>90.00  |  |
| City Portsmouth<br>State VA<br>Zip Code 23703  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MosesSykes</b>  |  | <b>Transaction ID: D32770</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 678 D Aqua Drive   |  | Amount of Each Disbursement this Period<br>65.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 235.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MarilynOlds</b>   |  | <b>Transaction ID: D32687</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3308 Nine Mile Rd.   |  | Amount of Each Disbursement this Period<br>20.00  |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BettySquire</b>   |  | <b>Transaction ID: D32466</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1600 N.27th St.  |  | Amount of Each Disbursement this Period<br>150.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JuwonHarris</b>   |  | <b>Transaction ID: D31947</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 835 B 33rd Street  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 230.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Rita Royster</b>  |  | <b>Transaction ID: D31600</b><br>Date of Disbursement<br>10 / 19 / 2006 |
| Mailing Address 1428 W 27th St #A  |  | Amount of Each Disbursement this Period<br>220.00                       |
| City Norfolk State VA Zip Code 23508   | Purpose of Disbursement<br>Canvassing Stipend  |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Rita Royster</b>  |  | <b>Transaction ID: D31713</b><br>Date of Disbursement<br>11 / 04 / 2006 |
| Mailing Address 1428 W 27th St #A  |  | Amount of Each Disbursement this Period<br>590.00                       |
| City Norfolk State VA Zip Code 23508   | Purpose of Disbursement<br>GOTV Stipend  |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. PatriceBaltimore</b>  |  | <b>Transaction ID: D32714</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St VUU  |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>830.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box]   |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BrianaScott</b>   |  | <b>Transaction ID: D32438</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1808 Terminal Ave  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Jessica Pfefferkorn</b>   |  | <b>Transaction ID: D31589</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 3236 Fluvanna Circle   |  | Amount of Each Disbursement this Period<br>200.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>Canvassing Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Jessica Pfefferkorn</b>   |  | <b>Transaction ID: D31703</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 3236 Fluvanna Circle   |  | Amount of Each Disbursement this Period<br>310.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 630.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CardellPatillo</b>  |  | <b>Transaction ID: D32610</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1509 Ellington Sq.   |  | Amount of Each Disbursement this Period<br>550.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23701  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Antwuan Griffin</b>   |  | <b>Transaction ID: D31696</b><br>Date of Disbursement<br>11 / 03 / 2006 |  |
| Mailing Address PO Box 27501   |  | Amount of Each Disbursement this Period<br>4000.00                      |  |
| City Richmond<br>State VA<br>Zip Code 23261  | Purpose of Disbursement<br>GOTV Political Consulting   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NajeniaCannon</b>   |  | <b>Transaction ID: D32344</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1102 Williamsburg Rd.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 4670.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. KevinBell</b>  |                  | <b>Transaction ID: D31812</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |                   |
| Mailing Address 6225 Warwick Rd   |                  | Amount of Each Disbursement this Period<br>60.00   |                   |
| City Richmond   | State VA         | Zip Code 23224   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. MalaikNelms</b>  |                  | <b>Transaction ID: D32529</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |                   |
| Mailing Address 719 Woodfin Road  |                  | Amount of Each Disbursement this Period<br>160.00  |                   |
| City Newport News   | State VA         | Zip Code 23605   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Ladonya Winston</b>  |                  | <b>Transaction ID: D31591</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6  |                   |
| Mailing Address 1045 W 37th St Apt 1  |                  | Amount of Each Disbursement this Period<br>220.00  |                   |
| City Norfolk  | State VA         | Zip Code 23508   | Category/<br>Type |
| Purpose of Disbursement<br>Canvassing Stipend   |                  | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 440.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |
|---|--|---|
| <b>A. Ladonya Winston</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1045 W 37th St<br>Apt 1<br>City Norfolk State VA Zip Code 23508<br>Purpose of Disbursement GOTV Stipend<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31705</b><br>Date of Disbursement<br>11 / 04 / 2006<br>Amount of Each Disbursement this Period<br>590.00<br>Category/Type |
|---|--|---|

|   |  |  |
|---|--|--|
| <b>B. AndreTaylor</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1102 Williamsburg Rd.<br>City Richmond State VA Zip Code 23231<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31887</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |  |   |
|--|--|---|
| <b>C. TakeiaGibbs</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5384 Hanyen Dr.<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32301</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 770.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. VincentRoss</b>   |  | <b>Transaction ID: D32193</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 490 Orcutt Lane  |  | Amount of Each Disbursement this Period<br>100.00   |  |
| City Richmond<br>State VA<br>Zip Code 23224  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. YasmineTaliaferro</b>   |  | <b>Transaction ID: D31990</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 528 - 21st   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. QuianaJohnson</b>   |  | <b>Transaction ID: D32757</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1217 Seaboard Ave.   |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 229 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. NathanielWatkins</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 612 N Hancock St<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32711</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|---|--|--|

|  |  |   |
|--|--|---|
| <b>B. SheebaSumpter</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3514 Bart Street<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32271</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|  |  |   |
|--|--|---|
| <b>C. JocieJarman</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 132 Garrett Drive<br>City Hampton State VA Zip Code 23669<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32461</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>140.00<br>Category/Type |
|--|--|---|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. WilliamFox II</b>   |  | <b>Transaction ID: D32410</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 447 Lee's Mill Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23608  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. K'SharaJarman</b>   |  | <b>Transaction ID: D31956</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 132 Garrett Drive  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Hampton<br>State VA<br>Zip Code 23669   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RenitaJohnson</b>   |  | <b>Transaction ID: D32722</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 9507 Spendthrift Circle, #221  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23294  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AnnetteClark</b>  |  | <b>Transaction ID: D32482</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 4240 Sedgewyck Circle  |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kevin Banks</b>   |  | <b>Transaction ID: D32478</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 5944 Lockamy Lane  |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Monica Sumpter</b>  |  | <b>Transaction ID: D32800</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address PO Box 3135  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Petersburg<br>State VA<br>Zip Code 23805  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 380.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CharmicaEpps</b>  |  | <b>Transaction ID: D32065</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>76.00                        |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. PhilipBell</b>  |  | <b>Transaction ID: D31813</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1029 Greystone Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond State VA Zip Code 23224  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LisimbaMontgomery</b>   |  | <b>Transaction ID: D31863</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1604 N. 28th St.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 196.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MarciaPrice</b>   |  | Transaction ID: D32664<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 938 Shore Drive  |  | Amount of Each Disbursement this Period<br>65.00                 |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name   |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. GregoryDavis</b>  |  | Transaction ID: D32676<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1712 Brookfield Rd.  |  | Amount of Each Disbursement this Period<br>20.00                 |  |
| City Richmond<br>State VA<br>Zip Code 23222  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name   |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. LeahChadwick</b>  |  | Transaction ID: D32080<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 13 Esther Ave  |  | Amount of Each Disbursement this Period<br>76.00                 |  |
| City Ewing<br>State NJ<br>Zip Code 8618  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 161.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. Faith Wilson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1730 Berkley Ave<br>City Norfolk State VA Zip Code 23509<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32456</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>136.00<br>Category/Type |
|--|--|---|

|   |  |  |
|---|--|--|
| <b>B. SylviaPoindexter</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2821 Poindexter Street<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32122</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|---|--|--|

|   |  |  |
|---|--|--|
| <b>C. SylviaPoindexter</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2821 Poindexter Street<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32123</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|---|--|--|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 296.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 235 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. IsaacSarver</b>  |                  | <b>Transaction ID: D32564</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address P.O. Box 1044   |                  | Amount of Each Disbursement this Period<br>180.00  |                   |
| City<br>Dublin  | State<br>VA      | Zip Code<br>24084  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. AliciaLove</b>   |                  | <b>Transaction ID: D32758</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 1419 Mellwood Ct.   |                  | Amount of Each Disbursement this Period<br>40.00   |                   |
| City<br>Norfolk   | State<br>VA      | Zip Code<br>23324  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Brandon Woodberry</b>  |                  | <b>Transaction ID: D31720</b><br>Date of Disbursement<br>11 / 04 / 2006  |                   |
| Mailing Address 25 Beacons Way #8   |                  | Amount of Each Disbursement this Period<br>90.00   |                   |
| City<br>Hampton   | State<br>VA      | Zip Code<br>23669  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Stipend   |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 310.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ShondaRobinson</b>  |  | <b>Transaction ID: D32477</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2003 Stalham Rd.   |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CarlHarrison</b>  |  | <b>Transaction ID: D32306</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5384 Hanyen Dr.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. WalterBarnett</b>   |  | <b>Transaction ID: D32208</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2803 Willows Arch  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 400.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. DanotaLewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N. Lombardy St<br>VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32073</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>B. CaitlinCummings</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address Watson Hall, UVA<br>City Charlottesville State VA Zip Code 22093<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32091</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|---|--|--|

|   |  |  |
|---|--|--|
| <b>C. LeRhondaPayton</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5944 Lockamy Lane<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32624</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|---|--|--|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 192.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 238 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Derick Leak</b>   |  | <b>Transaction ID: D31726</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 2341 Seaboard Road   |  | Amount of Each Disbursement this Period<br>45.00  |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AntoineHarris</b>   |  | <b>Transaction ID: D32417</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3017 Williams Ave  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. WesGlisson</b>  |  | <b>Transaction ID: D32175</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 302 N. 35th Street   |  | Amount of Each Disbursement this Period<br>100.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 265.00 |
| <b>TOTAL</b> 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 239 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CateedraLewis</b>   |  | <b>Transaction ID: D32547</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1716 Terminal Ave  |  | Amount of Each Disbursement this Period<br>180.00   |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BrandonWright</b>   |  | <b>Transaction ID: D32597</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 601 W. 34th St   |  | Amount of Each Disbursement this Period<br>360.00   |
| City Norfolk   | State VA Zip Code 23508  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. StevenDavis</b>   |  | <b>Transaction ID: D32026</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N Lombardy St<br>VUU  |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 616.00 |
| <b>TOTAL</b> 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 240 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. Kenneth Reid</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 830 27th Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32530</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>160.00 |
|--|--|--|

|   |  |   |
|---|--|---|
| <b>B. Ebony Strickland</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1017 35th Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31989</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00 |
|---|--|---|

|  |  |  |
|--|--|--|
| <b>C. Tameka Walker</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 545 Adams Dr. Apt 1B<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32444</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00 |
|--|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 241 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. JaneMiller</b>  |  | <b>Transaction ID: D32584</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 51 Hopkins St.   |  | Amount of Each Disbursement this Period<br>270.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23601  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. LanishaJenkins</b>  |  | <b>Transaction ID: D32239</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3917 Raintree Court  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CalvinWalker</b>  |  | <b>Transaction ID: D32053</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 831 Palace Ct  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23608  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 466.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AndreJasper</b>   |  | <b>Transaction ID: D32357</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1102 Williamsburg Rd.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JanelHamilton</b>   |  | <b>Transaction ID: D32156</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 8621 Kearsarge Place   |  | Amount of Each Disbursement this Period<br>90.00                        |  |
| City Norfolk<br>State VA<br>Zip Code 23503   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NickeaHunter</b>  |  | <b>Transaction ID: D32423</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 97 F 28th Street   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 330.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 243 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BrandyDavis</b>   |  | <b>Transaction ID: D31933</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 6129 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23605  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. NiricoelClements</b>  |  | <b>Transaction ID: D32484</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2512 Moton Street  |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RoniGonzalez</b>  |  | <b>Transaction ID: D32230</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1336 Rement Road   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 244 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Internal Revenue Service</b>  |  | <b>Transaction ID: D31667</b><br>Date of Disbursement<br>10 / 31 / 2006 |
| Mailing Address  |  | Amount of Each Disbursement this Period<br>33.87                        |
| City Philadelphia State PA Zip Code 19255-0001   | Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Internal Revenue Service</b>  |  | <b>Transaction ID: D31669</b><br>Date of Disbursement<br>10 / 31 / 2006 |
| Mailing Address  |  | Amount of Each Disbursement this Period<br>33.87                        |
| City Philadelphia State PA Zip Code 19255-0001   | Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Internal Revenue Service</b>  |  | <b>Transaction ID: D31690</b><br>Date of Disbursement<br>11 / 03 / 2006 |
| Mailing Address  |  | Amount of Each Disbursement this Period<br>3918.56                      |
| City Philadelphia State PA Zip Code 19255-0001   | Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>3986.30</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box]    |

# 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 245 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Internal Revenue Service</b>  |  | <b>Transaction ID:</b> D31777<br>Date of Disbursement<br>11 / 22 / 2006 |
| Mailing Address  |  | Amount of Each Disbursement this Period<br>3792.63                      |
| City<br>Philadelphia   | State<br>PA  |   |
| Zip Code<br>19255-0001   |  | <input type="checkbox"/> Category/<br>Type                              |
| Purpose of Disbursement<br>Payroll Taxes   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. YvonneTunstall</b>  |  | <b>Transaction ID:</b> D32693<br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2913 Hanes Ave.  |  | Amount of Each Disbursement this Period<br>20.00                        |
| City<br>Richmond   | State<br>VA  |   |
| Zip Code<br>23222  |  | <input type="checkbox"/> Category/<br>Type                              |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CliffordBarnett</b>   |  | <b>Transaction ID:</b> D32762<br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2803 Willows Arch  |  | Amount of Each Disbursement this Period<br>40.00                        |
| City<br>Chesapeake   | State<br>VA  |   |
| Zip Code<br>23324  |  | <input type="checkbox"/> Category/<br>Type                              |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>3852.63</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. DetraWilson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3330 Nine Mile Rd<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31908</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>B. ChristinaMitchell</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 100 N Lincoln St.<br>City Hampton State VA Zip Code 23669<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32145</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|--|--|--|

|   |  |   |
|---|--|---|
| <b>C. Angelene Coleman</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 808 Bold St.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32500</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>160.00<br>Category/Type |
|---|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CarnellPhillips</b>   |  | <b>Transaction ID: D31866</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1453 Jennie Scher Rd   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23231  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Molly Simmons</b>   |  | <b>Transaction ID: D31607</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 0 / 2 0 0 6 |
| Mailing Address 317 34th St  |  | Amount of Each Disbursement this Period<br>220.00   |
| City Virginia Beach State VA Zip Code 23451  | Purpose of Disbursement<br>Canvassing Stipend<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Molly Simmons</b>   |  | <b>Transaction ID: D31710</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 317 34th St  |  | Amount of Each Disbursement this Period<br>550.00   |
| City Virginia Beach State VA Zip Code 23451  | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 830.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Adisa Muse</b>  |  | <b>Transaction ID: D31751</b><br>Date of Disbursement<br>11 / 15 / 2006 |  |
| Mailing Address 116 So Plains Dr   |  | Amount of Each Disbursement this Period<br>1950.00                      |  |
| City Petersburg<br>State VA<br>Zip Code 23805  | Purpose of Disbursement<br>GOTV Consulting   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. RoyaleeneBest</b>   |  | <b>Transaction ID: D31920</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1513 Ivy Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Sean Williamson</b>   |  | <b>Transaction ID: D31694</b><br>Date of Disbursement<br>11 / 03 / 2006 |  |
| Mailing Address 337 47th St  |  | Amount of Each Disbursement this Period<br>600.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2610.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 249 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Sandra DeBrew</b>   |  | <b>Transaction ID: D31736</b><br>Date of Disbursement<br>11 / 04 / 2006 |
| Mailing Address 544 22nd St<br>APT C   |  | Amount of Each Disbursement this Period<br>1000.00                      |
| City Newport News<br>State VA<br>Zip Code 23607-4541   | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. AntoineMack</b>   |  | <b>Transaction ID: D31859</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 5610 Bayce Ln.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CalveshiaLewis</b>  |  | <b>Transaction ID: D31858</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1714 Jacqueline St   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1120.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MariaGonzalez</b>   |  | <b>Transaction ID: D32488</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1336 Hammerhead Lane   |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Norfolk   | State VA   |   |
| Zip Code 23324   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CarltonCarroll</b>  |  | <b>Transaction ID: D32511</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2613 Edgewood Ave.   |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Richmond  | State VA   |   |
| Zip Code 23222   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TreyMcIntyre</b>  |  | <b>Transaction ID: D32198</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 4101 Sue Cres.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Chesapeake  | State VA   |   |
| Zip Code 23324   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 440.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Krystle David</b>   |  | <b>Transaction ID: D31596</b><br>Date of Disbursement<br>10 / 19 / 2006 |
| Mailing Address 5805 Burrell Ave   |  | Amount of Each Disbursement this Period<br>260.00                       |
| City Norfolk   | State VA Zip Code 23518  |   |
| Purpose of Disbursement<br>Canvassing Stipend  |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ShawnettaBagley</b>   |  | <b>Transaction ID: D31804</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2601 Kensington Ave.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. HenryWarner</b>   |  | <b>Transaction ID: D32580</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 139 Libbey Street  |  | Amount of Each Disbursement this Period<br>240.00                       |
| City Hampton   | State VA Zip Code 23663  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 560.00 |
| <b>TOTAL</b> 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 252 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. KensonyuWoods</b>   |  | <b>Transaction ID: D32281</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 6217 Wendharpe Dr.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Shonda Copeland</b>   |  | <b>Transaction ID: D31593</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |
| Mailing Address 1068 Alexander Lane  |  | Amount of Each Disbursement this Period<br>140.00   |
| City Chesapeake State VA Zip Code 23322  | Purpose of Disbursement<br>Canvassing Stipend<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LaurenMarshok</b>   |  | <b>Transaction ID: D32159</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3148 Barbour Drive   |  | Amount of Each Disbursement this Period<br>90.00  |
| City Virginia Beach State VA Zip Code 23456  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 350.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Marjorie Jackson</b>  |  | <b>Transaction ID: D32356</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1932 Redd St.  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Chris Wilson</b>  |  | <b>Transaction ID: D32455</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1730 Berkley Ave   |  | Amount of Each Disbursement this Period<br>136.00                       |
| City Norfolk   | State VA Zip Code 23509  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Clifford Barnett</b>  |  | <b>Transaction ID: D32479</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2803 Willows Arch  |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Chesapeake  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>416.00</b> |
| <b>TOTAL</b> 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 254 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RyceanScott</b>   |  | <b>Transaction ID: D31985</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1808 Terminal Ave  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TonyClark</b>   |  | <b>Transaction ID: D32615</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 4240 Sedgewyck Circle  |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. GeorgeJohnson</b>   |  | <b>Transaction ID: D32358</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 523 N. 31st St.  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond<br>State VA<br>Zip Code 23219  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 255 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TanecaRiddick</b>   |  | <b>Transaction ID: D32204</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1061 Libertyville St.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MarvinHunter</b>  |  | <b>Transaction ID: D31952</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 535 22nd Street  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ChoikeMurray</b>  |  | <b>Transaction ID: D32729</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2214 Rosewood Ave  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 256 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ShandellTaylor</b>  |  | <b>Transaction ID: D31890</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 103 South Lake Ave.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AllenSmallwood</b>  |  | <b>Transaction ID: D32378</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 841 Circlewood Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DominickSmith</b>   |  | <b>Transaction ID: D31880</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3413 N. 21st St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____  |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. TonyOby</b>  |                  | <b>Transaction ID: D32183</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 2316 Cecil Road   |                  | Amount of Each Disbursement this Period<br>100.00  |                   |
| City Richmond   | State VA         | Zip Code 23220   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. QuadajaWright</b>  |                  | <b>Transaction ID: D32334</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 712 Crabapple St.   |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Portsmouth   | State VA         | Zip Code 23324   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. TyieshaWashington</b>  |                  | <b>Transaction ID: D32446</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 603 9th Ivy   |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Newport News   | State VA         | Zip Code 23607   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  |  |                   |
| Candidate Name  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. GregSanlon</b>  |  | <b>Transaction ID: D32565</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1809 E. Main St.<br>Apt. B   |  | Amount of Each Disbursement this Period<br>190.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. LorettaHilliard</b>   |  | <b>Transaction ID: D32422</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 544 14th Street  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. KyleMillard</b>   |  | <b>Transaction ID: D32469</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2249 Wind Bridge Circle  |  | Amount of Each Disbursement this Period<br>150.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 460.00 |
| <b>TOTAL</b> 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 259 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                 |  |  |
|---|-----------------|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>EveretteGaines, Jr.</p>  |                 | <p><b>Transaction ID:</b> D32353<br/><b>Date of Disbursement</b></p>   |  |
| <p>Mailing Address 3553 Missouri Ave.</p>   |                 | <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> |  |
| <p>City Richmond</p>  | <p>State VA</p> | <p>Zip Code 23223</p>  |  |
| <p>Purpose of Disbursement<br/>GOTV Worker</p>  |                 | <p>Amount of Each Disbursement this Period</p>   |  |
| <p>Candidate Name</p>   |                 | <p><input type="text" value="120.00"/></p>   |  |
| <p>Office Sought: <input type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> |                 | <p>Disbursement For: 2006<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>  |  |
| <p>State: District:</p>   |                 | <p>Category/<br/>Type</p>  |  |

|   |                 |  |  |
|---|-----------------|--|--|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>JeremiahDavis</p>  |                 | <p><b>Transaction ID:</b> D31934<br/><b>Date of Disbursement</b></p>   |  |
| <p>Mailing Address 6129 Jefferson Ave</p>   |                 | <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> |  |
| <p>City Newport News</p>  | <p>State VA</p> | <p>Zip Code 23605</p>  |  |
| <p>Purpose of Disbursement<br/>GOTV Worker</p>  |                 | <p>Amount of Each Disbursement this Period</p>   |  |
| <p>Candidate Name</p>   |                 | <p><input type="text" value="60.00"/></p>  |  |
| <p>Office Sought: <input type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> |                 | <p>Disbursement For: 2006<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>  |  |
| <p>State: District:</p>   |                 | <p>Category/<br/>Type</p>  |  |

|   |                 |  |  |
|---|-----------------|--|--|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>RaleneBrowder</p>  |                 | <p><b>Transaction ID:</b> D32472<br/><b>Date of Disbursement</b></p>   |  |
| <p>Mailing Address 537 Cedar Rd.</p>  |                 | <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> |  |
| <p>City Chesapeake</p>  | <p>State VA</p> | <p>Zip Code 23324</p>  |  |
| <p>Purpose of Disbursement<br/>GOTV Worker</p>  |                 | <p>Amount of Each Disbursement this Period</p>   |  |
| <p>Candidate Name</p>   |                 | <p><input type="text" value="160.00"/></p>   |  |
| <p>Office Sought: <input type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> |                 | <p>Disbursement For: 2006<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>  |  |
| <p>State: District:</p>   |                 | <p>Category/<br/>Type</p>  |  |

|   |  |
|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="340.00"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. RomonaLivermon</b>  |  | <b>Transaction ID: D32430</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 103 Golden Gate Drive<br>Apt 104   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Hampton State VA Zip Code 23663   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ElisabethPearson</b>  |  | <b>Transaction ID: D32588</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1510 Park Ave.<br>#3   |  | Amount of Each Disbursement this Period<br>304.00   |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. MauriceScott</b>  |  | <b>Transaction ID: D31876</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2601 Kensington Ave.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 484.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MauricePearson</b>  |  | <b>Transaction ID: D32465</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 912 Ridgecliff Dr  |  | Amount of Each Disbursement this Period<br>150.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23224  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JoshuaLachowski</b>   |  | <b>Transaction ID: D32059</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3803 Seasigh Ct  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TimothyHailey</b>   |  | <b>Transaction ID: D31943</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 524 A 21st St  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 286.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AlbertLok</b>   |  | <b>Transaction ID: D32052</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 710 W. Franklin St   |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Jay B Myerson</b>   |  | <b>Transaction ID: D31759</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6 |  |
| Mailing Address 11860 Sunrise Valley Dr.<br>STE 100  |  | Amount of Each Disbursement this Period<br>10000.00   |  |
| City Reston<br>State VA<br>Zip Code 20191-3308   | Purpose of Disbursement<br>Election-Related Legal Fees<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ShaneaseDickey</b>  |  | <b>Transaction ID: D32485</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 5409 Berry Hill Road   |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 10236.00 |
| <b>TOTAL</b> 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 263 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. WALTERIA WILLIFORD</b>  |  | <b>Transaction ID: D31907</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1714 Jaqueline St.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WILLIAMYARBROUGH</b>  |  | <b>Transaction ID: D32389</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2516 Bethel St.  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LAKEISHA FORBES</b>   |  | <b>Transaction ID: D32350</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1901 Whitcourt Rd.<br>Apt. 8   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>300.00</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Gary Thompson</b>   |  | <b>Transaction ID: D31893</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2706 Alexandria Ave.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23234  |  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WilnetMiller</b>  |  | <b>Transaction ID: D31862</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4706 Mason Dr.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  |  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. RolandBradby</b>  |  | <b>Transaction ID: D32672</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1607 Tyler St.   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond State VA Zip Code 23223  |  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 140.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CeasarMcConico</b>  |  | <b>Transaction ID: D32314</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 228 Chowan Trace   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Queen Hamilton</b>  |  | <b>Transaction ID: D31840</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2354 Fairfield Dr.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. RachardLewis</b>  |  | <b>Transaction ID: D32552</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1716 Terminal Ave  |  | Amount of Each Disbursement this Period<br>180.00                       |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00 |
| <b>TOTAL</b> 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 266 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ElissaMezzoni</b>   |  | <b>Transaction ID: D32605</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5232 Rockingham Drive  |  | Amount of Each Disbursement this Period<br>450.00   |
| City Williamsburg  | State VA Zip Code 23188  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Donte'Adamson</b>   |  | <b>Transaction ID: D32286</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1002 Horne Ave.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BarbaraArcher</b>   |  | <b>Transaction ID: D32671</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2600 Phaup St.   |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 590.00 |
| <b>TOTAL</b> 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 267 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ChanaeRice</b>  |  | <b>Transaction ID: D32450</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 561 Woodstock Rd   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Virginia Beach<br>State VA<br>Zip Code 23464  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Annette Bullock</b>   |  | <b>Transaction ID: D32107</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1823 N. 29th Street  |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CarlWhitehead</b>   |  | <b>Transaction ID: D32595</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3225 Dogwood Dr.   |  | Amount of Each Disbursement this Period<br>360.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23703  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 560.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 268 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. JulianCarrington</b>  |  | <b>Transaction ID: D32025</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmynd State VA Zip Code 23220  |  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. GailClyburn</b>   |  | <b>Transaction ID: D32573</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 545 Adams Drive<br>Apt 1B  |  | Amount of Each Disbursement this Period<br>240.00   |
| City Newport News State VA Zip Code 23607  |  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LisaJohnson</b>   |  | <b>Transaction ID: D31854</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2601 Kensington Ave.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  |  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 376.00 |
| <b>TOTAL</b> 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 269 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MelissaDale</b>   |  | <b>Transaction ID: D32403</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1103 James Drive   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SherryMurphy</b>  |  | <b>Transaction ID: D32254</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2704 Charleston Ave.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Letisha Williams</b>  |  | <b>Transaction ID: D32329</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1114 Alcindor Rd.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00 |
| <b>TOTAL</b> 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 270 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Andre Walker</b>  |  | <b>Transaction ID: D31895</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1141 Eggleston St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. RamariClyburn</b>   |  | <b>Transaction ID: D32398</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 545 Adams Drive<br>Apt 1B  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23601  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TreasaStewart</b>   |  | <b>Transaction ID: D32381</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1807 Q Street  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 271 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Kali Matalon</b>  |  | <b>Transaction ID: D31721</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 2512 Las Corrales Ct   |  | Amount of Each Disbursement this Period<br>90.00  |
| City Virginia Beach  | State VA Zip Code 23456  |   |
| Purpose of Disbursement<br>GOTV Stipend  |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. RolandBradby</b>  |  | <b>Transaction ID: D32105</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1607 Tyler St.   |  | Amount of Each Disbursement this Period<br>80.00  |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BarbaraCarter</b>   |  | <b>Transaction ID: D32572</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3500 Delaware Ave.   |  | Amount of Each Disbursement this Period<br>240.00   |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 410.00 |
| <b>TOTAL</b> 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 272 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AngieMancipe</b>  |  | <b>Transaction ID: D32090</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3207 Appleford Drive   |  | Amount of Each Disbursement this Period<br>76.00  |  |
| City Chester State VA Zip Code 23831   | Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Category/Type   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JosephCosby</b>   |  | <b>Transaction ID: D31825</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1904 Redd St.  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Category/Type   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TaronStubbs</b>   |  | <b>Transaction ID: D32651</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1500 N Lombardy St<br>VUU  |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Category/Type   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 176.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 273 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LaRyanScott</b>   |  | <b>Transaction ID: D32439</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1808 Terminal Ave  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amy Reger</b>   |  | <b>Transaction ID: D31660</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 3 0 / 2 0 0 6 |  |
| Mailing Address 4220 Pickett Street<br>Box 225   |  | Amount of Each Disbursement this Period<br>1914.65  |  |
| City The Plains<br>State VA<br>Zip Code 20198  | Purpose of Disbursement<br>Payroll   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amy Reger</b>   |  | <b>Transaction ID: D31747</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 4 / 2 0 0 6 |  |
| Mailing Address 4220 Pickett Street<br>Box 225   |  | Amount of Each Disbursement this Period<br>1914.65  |  |
| City The Plains<br>State VA<br>Zip Code 20198  | Purpose of Disbursement<br>Payroll   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>3949.30</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MarcusBrownlee</b>  |   | <b>Transaction ID: D31925</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 200 Majestic Ct. Apt 301   |   | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News State VA Zip Code 23606  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WesGlisson</b>  |   | <b>Transaction ID: D32653</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 302 N. 35th Street   |   | Amount of Each Disbursement this Period<br>40.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. StarneciaTaylor</b>   |   | <b>Transaction ID: D32382</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1102 Williamsburg Rd.  |   | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond State VA Zip Code 23231  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |   |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. JoanForbes</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2383 Bethel St<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32349</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00 |
|---|--|--|

|  |  |   |
|--|--|---|
| <b>B. Latice Wilikerson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1952 Redd Street<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32753</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00 |
|--|--|---|

|  |  |  |
|--|--|--|
| <b>C. Adrain Miles</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1544 w 39 th st apt #B Apt B<br>City Norfolk State VA Zip Code 23508<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32457</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>136.00 |
|--|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 296.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AnastasiaWaterfield</b>   |  | <b>Transaction ID: D32017</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2628 Pender Drive  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Virginia Beach  | State VA Zip Code 23456  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BilalAbdullah</b>   |  | <b>Transaction ID: D32654</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2101 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>40.00                        |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CandiceBeasley</b>  |  | <b>Transaction ID: D31809</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2601 Kensington Ave.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23220  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 160.00 |
| <b>TOTAL</b> 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 277 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. GailClyburn</b>   |  | <b>Transaction ID: D32642</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 545 Adams Drive<br>Apt 1B  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AltonTisdale</b>  |  | <b>Transaction ID: D31992</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1219 24th Street   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Monique Hill</b>  |  | <b>Transaction ID: D32063</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 176.00 |
| <b>TOTAL</b> 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 278 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ShareaseMcCallum</b>  |  | <b>Transaction ID:</b> D31970<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 545 17th Street<br>Apt C   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News State VA Zip Code 23607  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WilliamTolson</b>   |  | <b>Transaction ID:</b> D32072<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy ST<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LindaWatson</b>   |  | <b>Transaction ID:</b> D32771<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 76 Maple Ave   |  | Amount of Each Disbursement this Period<br>65.00  |
| City Newport News State VA Zip Code 23607  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 201.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DebraCleveland`</b>   |  | <b>Transaction ID: D32756</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 316 Killian Ave.   |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. StephanieFulgeon</b>  |  | <b>Transaction ID: D32487</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3029 Camelot Blvd.   |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JeneeWilliams</b>   |  | <b>Transaction ID: D32280</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address P.O. Box 7813  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 280 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DashiellCaffee, Jr.</b>   |  | <b>Transaction ID: D32214</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2851 Colchester Cresc.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CurtisSmith</b>   |  | <b>Transaction ID: D32325</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1718 Hodges Ferry Rd.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ClintonBryant</b>   |  | <b>Transaction ID: D32525</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2101 12C Kecoughtan  |  | Amount of Each Disbursement this Period<br>160.00   |
| City Hampton State VA Zip Code 23661   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 400.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ChristopherStokes</b>   |  | <b>Transaction ID: D32034</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N Lombardy St<br>VUU  |  | Amount of Each Disbursement this Period<br>76.00                        |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. LucyCruz</b>  |  | <b>Transaction ID: D32732</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3207 Appleford Drive   |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Chester State VA Zip Code 23831   | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AaronReese</b>  |  | <b>Transaction ID: D32263</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 7460 Rosefield Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 216.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]    |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. Joshua Jones</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 919 Druid Circle<br>City Norfolk State VA Zip Code 23504<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32561</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>180.00<br>Category/Type |
|--|--|---|

|   |  |   |
|---|--|---|
| <b>B. Niricoel Bowman</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2512 Moton Street<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32210</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

|  |  |  |
|--|--|--|
| <b>C. Lucrecia Carr</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 723 South St. Apt. B<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32629</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ShanneyWashington</b>   |  | <b>Transaction ID: D31899</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2513 Warwick Rd.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23224  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Betsy G. Anderson</b>   |  | <b>Transaction ID: D31657</b><br>Date of Disbursement<br>10 / 30 / 2006 |
| Mailing Address 6309 Hanover Ave   |  | Amount of Each Disbursement this Period<br>409.64                       |
| City Richmond  | State VA Zip Code 23226-3002   |   |
| Purpose of Disbursement<br>Payroll   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AnnScott</b>  |  | <b>Transaction ID: D32495</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 7721 Harrison Rd.  |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Norfolk   | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 629.64      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. BarbaraArcher</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2600 Phaup St.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32104</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>B. JaPrinceCarter</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N. Lombardy St<br>VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32043</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>C. WilliamCousins</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5000 Midlothian Turnpike<br>Apt. 27<br>City Richmond State VA Zip Code 23224<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31827</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 216.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. LionelHarris</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1358 29th Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31949</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|   |  |  |
|---|--|--|
| <b>B. KadijuhTaylor</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1102 Williamsburg Rd.<br>City Richmond State VA Zip Code 23232<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31888</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>C. AshleyCabler</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N. Lombardy St VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32724</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|--|--|--|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 140.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Direct Line Politics</b>  |  | <b>Transaction ID:</b> D31781<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 2 7 / 2 0 0 6 |
| Mailing Address 107 Oronoco Street<br>Suite 100  |  | Amount of Each Disbursement this Period<br>2060.48   |
| City Alexandria State VA Zip Code 22314  |  |  |
| Purpose of Disbursement Exempt Mail Program/Webb VA Senate<br>Candidate Name   |  | Category/<br>Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Reginald Fletcher</b>   |  | <b>Transaction ID:</b> D31940<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 97 D 28th Street   |  | Amount of Each Disbursement this Period<br>60.00   |
| City Newport News State VA Zip Code 23607  |  |  |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  | Category/<br>Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Kenny Nichols</b>   |  | <b>Transaction ID:</b> D32458<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1326 w 26th st   |  | Amount of Each Disbursement this Period<br>136.00  |
| City Norfolk State VA Zip Code 23508   |  |  |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  | Category/<br>Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2256.48     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 287 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AlexisTyree-Williams</b>  |  | <b>Transaction ID: D32273</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3642 Sharpley Lane   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AngelaMitchell</b>  |  | <b>Transaction ID: D32011</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 9312 Baumont St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Norfolk<br>State VA<br>Zip Code 23503   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. SandraLewis</b>   |  | <b>Transaction ID: D32669</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 544 22nd Street<br>Apt C   |  | Amount of Each Disbursement this Period<br>65.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 245.00 |
| <b>TOTAL</b> 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 288 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BofnosaStewart</b>  |  | <b>Transaction ID: D31886</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1807 Q Street  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Alphonso Dale</b>   |  | <b>Transaction ID: D31780</b><br>Date of Disbursement<br>11 / 27 / 2006 |
| Mailing Address 1103 James Drive   |  | Amount of Each Disbursement this Period<br>600.00                       |
| City Newport News  | State VA Zip Code 23605  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. NancyAlston</b>   |  | <b>Transaction ID: D32740</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1104 Apperson Street   |  | Amount of Each Disbursement this Period<br>40.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 700.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 289 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Brittany Charity</b>  |  | <b>Transaction ID: D32805</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 15901 South Crater Rd.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Petersburg State VA Zip Code 23805  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. RachelEaster</b>  |  | <b>Transaction ID: D32192</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address Watson Hall, UVA   |  | Amount of Each Disbursement this Period<br>100.00   |
| City Charlottesville State VA Zip Code 22093   | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. MalaikNelms</b>   |  | <b>Transaction ID: D32768</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 719 Woodfin Road   |  | Amount of Each Disbursement this Period<br>65.00  |
| City Newport News State VA Zip Code 23605  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 225.00 |
| <b>TOTAL</b> 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 290 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ChrisBeall</b>  |   | <b>Transaction ID: D32093</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6                           |  |
| Mailing Address <b>Watson Hall, UVA</b>  |   | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 5px; text-align: right;">76.00</div> |  |
| City<br><b>Charlottesville</b>   | State    Zip Code<br>VA        22093  |   |  |
| Purpose of Disbursement<br>GOTV Worker   |   |   | <div style="border: 1px solid black; padding: 5px;">Category/<br/>Type</div> |
| Candidate Name   |   |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State:                District:  |   |   |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DonnaThornton</b>   |   | <b>Transaction ID: D32532</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6                            |  |
| Mailing Address <b>830 27th Street</b>   |   | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 5px; text-align: right;">160.00</div> |  |
| City<br><b>Newport News</b>  | State    Zip Code<br>VA        23607  |  |  |
| Purpose of Disbursement<br>GOTV Worker   |   |  | <div style="border: 1px solid black; padding: 5px;">Category/<br/>Type</div> |
| Candidate Name   |   |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State:                District:  |   |  |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JerardElliott</b>   |   | <b>Transaction ID: D32299</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6                            |  |
| Mailing Address <b>3400 Brandywine Dr.</b>   |   | Amount of Each Disbursement this Period<br><div style="border: 1px solid black; padding: 5px; text-align: right;">120.00</div> |  |
| City<br><b>Chesapeake</b>  | State    Zip Code<br>VA        23324  |  |  |
| Purpose of Disbursement<br>GOTV Worker   |   |  | <div style="border: 1px solid black; padding: 5px;">Category/<br/>Type</div> |
| Candidate Name   |   |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State:                District:  |   |  |  |

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|--|---|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <div style="border: 1px solid black; padding: 5px;">356.00</div>        |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | <div style="border: 1px solid black; height: 20px; width: 100%;"></div> |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. AerialPayton</b>   |                  | <b>Transaction ID: D32257</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 5944 Lockamy Lane   |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Norfolk  | State VA         | Zip Code 23324   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. BruceTyson</b>   |                  | <b>Transaction ID: D31993</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 4622 Madison Ave  |                  | Amount of Each Disbursement this Period<br>60.00   |                   |
| City Newport News   | State VA         | Zip Code 23607   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Melvin Newby</b>   |                  | <b>Transaction ID: D32316</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 103 Navajo Trail  |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Portsmouth   | State VA         | Zip Code 23324   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AnjilChase</b>  |  | <b>Transaction ID: D32215</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 4533 West Norfolk Road   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CharlottePostell</b>  |  | <b>Transaction ID: D32370</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1529 N. 20th St.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DeAndreBarnes</b>   |  | <b>Transaction ID: D32391</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2216 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. Bernard Robinson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1130 37th Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32708</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|---|--|--|

|   |  |   |
|---|--|---|
| <b>B. JackieCoker</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N. Lombardy St VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32173</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>100.00<br>Category/Type |
|---|--|---|

|  |  |   |
|--|--|---|
| <b>C. Geoff Spivey</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2209 Lynx Drive<br>City Virginia Beach State VA Zip Code 23456<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32609</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>510.00<br>Category/Type |
|--|--|---|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 630.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 294 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. AliFaruk</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1605 Grove Ave<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32019</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|---|--|--|

|   |  |  |
|---|--|--|
| <b>B. IreshaPicot</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 711 W. Main St.<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32121</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|---|--|--|

|  |  |   |
|--|--|---|
| <b>C. MekaOnescu</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address Frist Campus Center<br>City Princeton State NJ Zip Code 8544<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32188</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>100.00<br>Category/Type |
|--|--|---|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Joshua Brandwein</b>  |  | <b>Transaction ID: D31727</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 1472 Mill Landing Road   |  | Amount of Each Disbursement this Period<br>45.00  |  |
| City Virginia Beach<br>State VA<br>Zip Code 23457  | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name<br>Category/Type   |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Lucrecia Carr</b>   |  | <b>Transaction ID: D32498</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 723 South St.<br>Apt. B  |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Jasmine Quarrells</b>   |  | <b>Transaction ID: D32262</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 514 Weaver Circle  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 325.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MarquitaMcConico</b>  |  | <b>Transaction ID: D32505</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 228 Chowan Trace<br>Apt. B   |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JessicaPfefferkorn</b>  |  | <b>Transaction ID: D32606</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3236 Fluvanna Circle   |  | Amount of Each Disbursement this Period<br>450.00                       |
| City Virginia Beach State VA Zip Code 23456  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. P. Wiliford</b>   |  | <b>Transaction ID: D32127</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1105 Mosby Street  |  | Amount of Each Disbursement this Period<br>80.00                        |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 690.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. LemarNelms</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 719 Woodfin Road<br>City Newport News State VA Zip Code 23605<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31974</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>B. Avery Brooks</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3418 E. Clay St<br>City Richmond State VA Zip Code 23219<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31816</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>C. KennyHenry</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 4240 Sedgewyck Circle<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32233</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ClaireChapman</b>   |  | <b>Transaction ID: D32166</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 21110 W. Cary St   |  | Amount of Each Disbursement this Period<br>100.00   |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. RavoneWilkerson</b>   |  | <b>Transaction ID: D31903</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3000 E. Broad St.  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. KrystleDavid</b>  |  | <b>Transaction ID: D32007</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5805 Burrell Ave.  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Norfolk State VA Zip Code 23518   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 299 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. JosephWilliams</b>  |  | <b>Transaction ID: D32696</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2414 North 28th Street   |  | Amount of Each Disbursement this Period<br>20.00  |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DanielleWarlick</b>   |  | <b>Transaction ID: D32602</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1065 Piper Place   |  | Amount of Each Disbursement this Period<br>420.00   |  |
| City Laurenceville<br>State GA<br>Zip Code 30043   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NicoleElliott</b>   |  | <b>Transaction ID: D32502</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3400 Brandywine Dr.  |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 600.00 |
| <b>TOTAL</b> 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 300 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DouglasNelms</b>  |  | <b>Transaction ID: D31973</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 719 Woodfin Road   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23605  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SergioHamlin</b>  |  | <b>Transaction ID: D32543</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 530 D 22nd   |  | Amount of Each Disbursement this Period<br>180.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Geoff Spivey</b>  |  | <b>Transaction ID: D31587</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |  |
| Mailing Address 2209 Lynx Dr   |  | Amount of Each Disbursement this Period<br>425.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>Canvassing Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 665.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Geoff Spivey</b>  |  | <b>Transaction ID: D31701</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 3 / 2 0 0 6 |  |
| Mailing Address 2209 Lynx Dr   |  | Amount of Each Disbursement this Period<br>485.00   |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SonyaBoston</b>   |  | <b>Transaction ID: D32289</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2413 Aspin St.   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. LatoyaFitzgerald</b>  |  | <b>Transaction ID: D32746</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1505 Hickey St.  |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 645.00 |
| <b>TOTAL</b> 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 302 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Diontae Washington</b>  |  | <b>Transaction ID: D31896</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1529 N. 20th St.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Chynna McCaden</b>  |  | <b>Transaction ID: D32806</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 15901 South Crater Rd.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Petersburg  | State VA Zip Code 23805  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Orlando Lewis</b>   |  | <b>Transaction ID: D32567</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 544 C 14th Street  |  | Amount of Each Disbursement this Period<br>200.00                       |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AmandaSekerak</b>   |  | <b>Transaction ID: D32586</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2516 Elson Green Ct  |  | Amount of Each Disbursement this Period<br>270.00   |
| City Virginia Beach State VA Zip Code 23454  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ValentinoChristian</b>  |  | <b>Transaction ID: D31822</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2541 Bethel St.  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DarrylWilliams</b>  |  | <b>Transaction ID: D32387</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 209 Fairfield Ave.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 450.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TerrellNicholas</b>   |  | <b>Transaction ID: D32369</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5000 Midlothian Turnpike<br>Apt. 27  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond State VA Zip Code 23224  |  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MekaOnescu</b>  |  | <b>Transaction ID: D32730</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address Frist Campus Center  |  | Amount of Each Disbursement this Period<br>20.00  |
| City Princeton State NJ Zip Code 8544  |  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. MildredChiles</b>   |  | <b>Transaction ID: D31821</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 7923 Capestrano Dr.  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23227  |  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 305 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DanielKnight</b>  |  | <b>Transaction ID: D31960</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 624 44th Street  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DanielKnight</b>  |  | <b>Transaction ID: D31961</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 624 44th Street  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MikeKing</b>  |  | <b>Transaction ID: D31959</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3003 Apt#3   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 180.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TimothyBrown</b>  |  | <b>Transaction ID: D31923</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1014 35th Street   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JamesWillis</b>   |  | <b>Transaction ID: D32772</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2101 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>65.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RacqueleonaClyburn</b>  |  | <b>Transaction ID: D32538</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 545 Adams Dr. Apt 1B   |  | Amount of Each Disbursement this Period<br>180.00   |  |
| City Newport News<br>State VA<br>Zip Code 23601  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 305.00 |
| <b>TOTAL</b> 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 307 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MercedesJackson</b>   |  | <b>Transaction ID: D32426</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 813 23rd Street  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Alexandria Price</b>  |  | <b>Transaction ID: D32013</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 4464 Kidder Dr.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Virginia Beach<br>State VA<br>Zip Code 23462  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AngelaHarris</b>  |  | <b>Transaction ID: D32644</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3017 Williams St.  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 308 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Nate Palin</b>  |  | <b>Transaction ID: D32152</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1216 Curie Ct.   |  | Amount of Each Disbursement this Period<br>90.00                        |
| City Norfolk   | State VA Zip Code 23513  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JamesWillis</b>   |  | <b>Transaction ID: D32535</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2101 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AmariAklin</b>  |  | <b>Transaction ID: D31914</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 50 Tupelo Circle   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Hampton   | State VA Zip Code 23666  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 310.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. YvetteWebster</b>   |  | <b>Transaction ID: D32386</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2223 Creighton Rd  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond  | State VA   |   |
| Zip Code 23223   | Category/Type  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. VictoriaBrown</b>   |  | <b>Transaction ID: D32006</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2113 Tennyson Court  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Virginia Beach  | State VA   |   |
| Zip Code 23454   | Category/Type  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TanyaWilliams</b>   |  | <b>Transaction ID: D32328</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1114 Alcindor Rd.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth  | State VA   |   |
| Zip Code 23324   | Category/Type  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DevonBrown</b>  |  | <b>Transaction ID: D32211</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4237 Sedgewyck Circle  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. George Burke</b>  |  | <b>Transaction ID: D31622</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 3226 Sleepy Hollow Rd  |  | Amount of Each Disbursement this Period<br>190.28   |
| City Falls Church State VA Zip Code 22042-4312   | Purpose of Disbursement<br>Grassroots Campaign Materials   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. SharonHerman</b>  |  | <b>Transaction ID: D31844</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2081 Creighton Rd.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 370.28 |
| <b>TOTAL</b> 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 311 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RoderickWhite</b>   |  | <b>Transaction ID: D31998</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 60 Ash Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AmberFulgeon</b>  |  | <b>Transaction ID: D32227</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3029 Camelot Blvd.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amanda Sekerak</b>  |  | <b>Transaction ID: D31716</b><br>Date of Disbursement<br>11 / 04 / 2006 |  |
| Mailing Address 2516 Elson Green Ct  |  | Amount of Each Disbursement this Period<br>80.00                        |  |
| City Virginia Beach<br>State VA<br>Zip Code 23454  | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Tiffany Woodson</b>   |  | <b>Transaction ID: D31594</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6  |
| Mailing Address 2601 Cerprew Ave #3025C  |  | Amount of Each Disbursement this Period<br>120.00  |
| City Norfolk State VA Zip Code 23504   | Purpose of Disbursement<br>Canvassing Stipend<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AdrienMorris</b>  |   | <b>Transaction ID: D32060</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address 1500 N. Lombardy St VUU  |   | Amount of Each Disbursement this Period<br>76.00   |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AlisonSmith</b>   |   | <b>Transaction ID: D32015</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address 2724 Alamance Circle   |   | Amount of Each Disbursement this Period<br>60.00   |
| City Virginia Beach State VA Zip Code 23456  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. SandraWebster</b>   |  | <b>Transaction ID: D31900</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2223 Creighton Rd  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DarnelBelsches</b>  |  | <b>Transaction ID: D32339</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3077 Creighton Rd.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. JacquelineWhitaker</b>  |  | <b>Transaction ID: D32037</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5918 Shasbank Ct   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23227  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. GlennStarnes</b>  |  | <b>Transaction ID: D32168</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>100.00   |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Nick Mazarakis</b>  |  | <b>Transaction ID: D31588</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |
| Mailing Address 8148 Tidal Rd  |  | Amount of Each Disbursement this Period<br>660.00   |
| City Norfolk State VA Zip Code 23518   | Purpose of Disbursement<br>Canvassing Stipend<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Nick Mazarakis</b>  |  | <b>Transaction ID: D31702</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 8148 Tidal Rd  |  | Amount of Each Disbursement this Period<br>655.00   |
| City Norfolk State VA Zip Code 23518   | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1415.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TonyaRoebuck</b>  |  | <b>Transaction ID: D32749</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2446 Carmine St.   |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. mathew Wormley</b>  |  | <b>Transaction ID: D31910</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 6225 Warwick Rd  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23225  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MalindaThornton</b>   |  | <b>Transaction ID: D32709</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 700 Waterfront Circle<br>Apt 1107  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 120.00 |
| <b>TOTAL</b> 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 316 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. OlympiaSumpter</b>  |  | <b>Transaction ID:</b> D32270<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3514 Bart Street   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth  | State VA   |   |
| Zip Code 23324   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SamBreslin</b>  |  | <b>Transaction ID:</b> D32092<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address Watson Hall, UVA   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Charlottesville   | State VA   |   |
| Zip Code 22093   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. KeneethMoore</b>  |  | <b>Transaction ID:</b> D32623<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4533 West Norfolk Road   |  | Amount of Each Disbursement this Period<br>40.00  |
| City Portsmouth  | State VA   |   |
| Zip Code 23324   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 236.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PamCernjul</b>  |  | <b>Transaction ID: D32447</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 920 Queen Elizabeth Drive  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Virginia Beach  | State VA Zip Code 23452  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. LatoyaHenderson</b>   |  | <b>Transaction ID: D32047</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 16083 W. Patrick Henry Rd  |  | Amount of Each Disbursement this Period<br>76.00  |
| City Montpelier  | State VA Zip Code 23192  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CassandraBullock</b>  |  | <b>Transaction ID: D32741</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1604 N. 28th St  |  | Amount of Each Disbursement this Period<br>40.00  |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 236.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. ShatonyaHunter</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 935 37th Street<br>Apt 7<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32135</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|---|--|--|

|  |  |   |
|--|--|---|
| <b>B. CourtneyMcCay</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N. Lombardy St<br>VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32184</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>100.00<br>Category/Type |
|--|--|---|

|   |  |  |
|---|--|--|
| <b>C. ChinastyDuck</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 801 Lassiter Drive<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31938</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TowandaGrooms</b>   |  | <b>Transaction ID: D31838</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1901 Whitcourt Apt#8   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ShawndaCole</b>   |  | <b>Transaction ID: D32218</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2322 Rush Street   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. MauricePearson</b>  |  | <b>Transaction ID: D32660</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 912 Ridgecliff Dr  |  | Amount of Each Disbursement this Period<br>65.00  |
| City Richmond State VA Zip Code 23224  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 245.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 320 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. KatherineTapp</b>   |  | <b>Transaction ID: D32036</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. LindaWatson</b>   |  | <b>Transaction ID: D32533</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 76 Maple Ave   |  | Amount of Each Disbursement this Period<br>160.00   |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AndrewChapman</b>   |  | <b>Transaction ID: D32630</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address P.O. Box 216   |  | Amount of Each Disbursement this Period<br>40.00  |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 276.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amanda Priest</b>   |  | <b>Transaction ID: D32014</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 921 Darby Road   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Virginia Beach<br>State VA<br>Zip Code 23461  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Rita Royster</b>  |  | <b>Transaction ID: D32591</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1431 W. 27th Street  |  | Amount of Each Disbursement this Period<br>330.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23508   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MariaGonzalez</b>   |  | <b>Transaction ID: D32620</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1336 Hammerhead Lane   |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 430.00 |
| <b>TOTAL</b> 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 322 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TerrellDebrew</b>   |  | <b>Transaction ID: D32541</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 544 C 22nd Street  |  | Amount of Each Disbursement this Period<br>180.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JordanBrown</b>   |  | <b>Transaction ID: D31922</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2256 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. YillaSmith</b>  |  | <b>Transaction ID: D32637</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 649 E. Leicester Ave.<br>Apt. B9   |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 323 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. ElijahSmallwood</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 531 A 21st Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31987</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |  |   |
|--|--|---|
| <b>B. AnnieGiles</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2516 Bethel St.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32354</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|  |  |   |
|--|--|---|
| <b>C. AntonioRedmond</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 506 Roosevelt Blvd.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32319</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AngelaPrice</b>   |  | <b>Transaction ID: D31869</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5705 Westover Village  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23225  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Chela Laws</b>  |  | <b>Transaction ID: D32244</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3641 Sharpley Lane   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JessGutierrez</b>   |  | <b>Transaction ID: D32083</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address Frist Campus Center  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Princeton<br>State NJ<br>Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KendraEason</b>   |  | <b>Transaction ID: D32222</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 407 W. 34th Street   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MontaeHarris</b>  |  | <b>Transaction ID: D32420</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 637 Milford Ave  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Hampton<br>State VA<br>Zip Code 23661   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DeVonUpshur</b>   |  | <b>Transaction ID: D31994</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 154 Nantucket Place  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23606  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. WilbertSanders</b>  |  | <b>Transaction ID: D31982</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 544 14th Street  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DeondreJackson</b>  |  | <b>Transaction ID: D32355</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2535 Bethel St.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Linemark Printing</b>   |  | <b>Transaction ID: D31760</b><br>Date of Disbursement<br>11 / 15 / 2006 |  |
| Mailing Address 1220 Caraway Court<br>Suite 1040   |  | Amount of Each Disbursement this Period<br>5985.30                      |  |
| City Largo<br>State MD<br>Zip Code 20774   | Purpose of Disbursement<br>Absentee Brochure Printing  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>6165.30</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Linemark Printing</b>   |  | <b>Transaction ID:</b> D31757<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6 |
| Mailing Address 1220 Caraway Court<br>Suite 1040   |  | Amount of Each Disbursement this Period<br>6623.40   |
| City Largo State MD Zip Code 20774   | Purpose of Disbursement<br>Sample Ballot Printing<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SheralineGayle</b>  |  | <b>Transaction ID:</b> D31942<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 530 19th Street<br>Apt H   |  | Amount of Each Disbursement this Period<br>60.00   |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. SyrettaHill</b>   |  | <b>Transaction ID:</b> D32235<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1422 Lake Forest Drive   |  | Amount of Each Disbursement this Period<br>120.00  |
| City Portsmouth State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 6803.40 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. Robin Richardson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1116 Columbnia Street<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32265</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|   |  |  |
|---|--|--|
| <b>B. EvelynRobinson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3413 N. 21st St.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32691</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|---|--|--|

|  |  |  |
|--|--|--|
| <b>C. Valerie Harold</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2030 N Adams St #1008<br>City Arlington State VA Zip Code 22201<br>Purpose of Disbursement GOTV Stipend<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31695</b><br>Date of Disbursement<br>11 / 03 / 2006<br>Amount of Each Disbursement this Period<br>1000.00<br>Category/Type |
|--|--|--|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1140.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 329 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Michael Aikens</b>  |  | <b>Transaction ID: D32390</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 624 35th Street  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. David Krystle</b>   |  | <b>Transaction ID: D31708</b><br>Date of Disbursement<br>11 / 04 / 2006 |
| Mailing Address 5805 Burrell Ave   |  | Amount of Each Disbursement this Period<br>670.00                       |
| City Norfolk   | State VA Zip Code 23518  |   |
| Purpose of Disbursement<br>GOTV Stipend  |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Kadee Gray</b>  |  | <b>Transaction ID: D32413</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 5935 Marshall Ave  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 910.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ClementNdihah</b>   |  | <b>Transaction ID: D32712</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4501 Burgess House Lane  |  | Amount of Each Disbursement this Period<br>20.00  |
| City Richmond State VA Zip Code 23236  |  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Lisa West</b>   |  | <b>Transaction ID: D32508</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5815 Frament Ave Apt. 104  |  | Amount of Each Disbursement this Period<br>160.00   |
| City Norfolk State VA Zip Code 23324   |  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AnthonyFloyd</b>  |  | <b>Transaction ID: D32408</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1027 23st  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Newport News State VA Zip Code 23607  |  |   |
| Purpose of Disbursement<br>GOTV Worker   | <input type="checkbox"/> Category/<br>Type   |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. MishaMcKoy</b>  |  | <b>Transaction ID: D32045</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00                        |                   |
| City Richmond  | State VA   |   | Zip Code 23220    |
| Purpose of Disbursement<br>GOTV Worker   |  |   | Category/<br>Type |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. JalisaKeeling</b>   |  | <b>Transaction ID: D32310</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address 5384 Hanyen Dr.  |  | Amount of Each Disbursement this Period<br>120.00                       |                   |
| City Portsmouth  | State VA   |   | Zip Code 23324    |
| Purpose of Disbursement<br>GOTV Worker   |  |   | Category/<br>Type |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

|  |  |   |                   |
|--|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. WilliePierce</b>  |  | <b>Transaction ID: D32317</b><br>Date of Disbursement<br>11 / 07 / 2006 |                   |
| Mailing Address Fernwood Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |                   |
| City Chesapeake  | State VA   |   | Zip Code 23324    |
| Purpose of Disbursement<br>GOTV Worker   |  |   | Category/<br>Type |
| Candidate Name   |  |   |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:   |  |   |                   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>316.00</b> |
| <b>TOTAL</b> 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 332 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. JohnWilson</b>  |  | <b>Transaction ID: D31909</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3330 Nine Mile Rd  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JimmieWhitby</b>  |  | <b>Transaction ID: D31997</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1716 Terminal Avenue   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23602  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JimmieWhitby</b>  |  | <b>Transaction ID: D32534</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1716 Terminal Avenue   |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Newport News<br>State VA<br>Zip Code 23602  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 333 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TeandreBurnette</b>   |  | <b>Transaction ID: D31818</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 301 40th St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AdrianHilliard</b>  |  | <b>Transaction ID: D32421</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 544 14th Street  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BenEaster</b>   |  | <b>Transaction ID: D32728</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address Frist Campus Center  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Princeton<br>State NJ<br>Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. JakeHolmes</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 6255 Warwick Rd<br>City Richmond State VA Zip Code 23225<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32116</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>B. KenyaBell</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 945 17th Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31918</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |  |   |
|--|--|---|
| <b>C. KatherineFarr</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3824 Monterrey Court<br>City Virginia Beach State VA Zip Code 23453<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32612</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>690.00<br>Category/Type |
|--|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 830.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 335 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Sarah MaeClyburn</b>  |  | <b>Transaction ID: D32400</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 717 20st   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Danielle Warlick</b>  |  | <b>Transaction ID: D31597</b><br>Date of Disbursement<br>10 / 19 / 2006 |  |
| Mailing Address 1061 Piper Lane  |  | Amount of Each Disbursement this Period<br>210.00                       |  |
| City Lawrenceville<br>State GA<br>Zip Code 30043   | Purpose of Disbursement<br>Canvassing Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Danielle Warlick</b>  |  | <b>Transaction ID: D31709</b><br>Date of Disbursement<br>11 / 04 / 2006 |  |
| Mailing Address 1061 Piper Lane  |  | Amount of Each Disbursement this Period<br>550.00                       |  |
| City Lawrenceville<br>State GA<br>Zip Code 30043   | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>880.00</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Angellzard</b>  |  | Transaction ID: D32009<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 356 McKinnley Ave.   |  | Amount of Each Disbursement this Period<br>60.00                 |  |
| City Kenmore<br>State NY<br>Zip Code 14217   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SanteleRichey</b>   |  | Transaction ID: D32066<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00                 |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. SusanSharpe</b>   |  | Transaction ID: D32041<br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00                 |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 212.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. PatriciaDarden</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2123 Jefferson Ave<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31932</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|   |  |   |
|---|--|---|
| <b>B. WinslowBolton</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1368 18th St, Apt.B<br>City Chesapeake State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31786</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

|  |  |  |
|--|--|--|
| <b>C. KashundaPicott</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 651 21st Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31978</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 338 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. NastasiaJohnson</b>   |  | <b>Transaction ID: D31855</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1813 Westmoore St.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond  | State VA   |   |
| Zip Code 23220   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Raven Prince</b>  |  | <b>Transaction ID: D32799</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 6301 Edge Wood Dr.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Disputana   | State VA   |   |
| Zip Code 23842   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. MauriceBrowder, Sr.</b>   |  | <b>Transaction ID: D31790</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 537 Cedar Rd.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Chesapeake  | State VA   |   |
| Zip Code 23324   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BettySquire</b>   |  | <b>Transaction ID: D32661</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1600 N.27th St.  |  | Amount of Each Disbursement this Period<br>65.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. LaShundaScott</b>   |  | <b>Transaction ID: D31984</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1032 Hampton Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Christina E Rieland</b>   |  | <b>Transaction ID: D31595</b><br>Date of Disbursement<br>10 / 19 / 2006 |  |
| Mailing Address 9232 Burkman Ave<br>Apt B  |  | Amount of Each Disbursement this Period<br>240.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23503   | Purpose of Disbursement<br>Canvassing Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 365.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Christina E Rieland</b>   |  | <b>Transaction ID: D31707</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 9232 Burkman Ave<br>Apt B  |  | Amount of Each Disbursement this Period<br>350.00   |
| City Norfolk State VA Zip Code 23503   | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Lester Gudiel</b>   |  | <b>Transaction ID: D32087</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3207 Appleford Drive   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Chester State VA Zip Code 23831   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Brenner Tobe</b>  |  | <b>Transaction ID: D31663</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 3 0 / 2 0 0 6 |
| Mailing Address 4703 New Kent Ave  |  | Amount of Each Disbursement this Period<br>2131.46  |
| City Richmond State VA Zip Code 23225-3209   | Purpose of Disbursement<br>Payroll<br>Candidate Name<br>Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2557.46 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Brenner Tobe</b>  |  | <b>Transaction ID: D31749</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 4 / 2 0 0 6 |
| Mailing Address 4703 New Kent Ave  |  | Amount of Each Disbursement this Period<br>2131.46  |
| City Richmond State VA Zip Code 23225-3209   | Purpose of Disbursement Payroll<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DawudMuhammad</b>   |  | <b>Transaction ID: D32433</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1314 Oak Ave   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. StephanieGrandison</b>  |  | <b>Transaction ID: D32088</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3207 Appleford Drive   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Chester State VA Zip Code 23831   | Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2327.46 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TishaSmith</b>  |  | <b>Transaction ID: D32638</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1718 Hodges Ferry Rd.  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DavidMills</b>  |  | <b>Transaction ID: D32464</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2820 East Marshall St.   |  | Amount of Each Disbursement this Period<br>140.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DerendaCaleb</b>  |  | <b>Transaction ID: D32343</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address PO Box 8133  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TashomnaCorrea</b>  |  | <b>Transaction ID: D32219</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 973 Teal Ct.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Terrance Miles</b>  |  | <b>Transaction ID: D32153</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1009 Bowe Place  |  | Amount of Each Disbursement this Period<br>90.00                        |  |
| City Norfolk<br>State VA<br>Zip Code 23505   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AquanettaScott</b>  |  | <b>Transaction ID: D32376</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1528 Coalter St.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 330.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. HelenaPayton</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1014 Bowie Place<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32258</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|  |  |  |
|--|--|--|
| <b>B. ShaneaseDickey</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5409 Berry Hill Road<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32617</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>C. MonikaWright</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3007 Turnpike Rd.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32331</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 345 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. JamarHunter</b>   |  | <b>Transaction ID: D31951</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 535 22nd Street  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ClaudineForche</b>  |  | <b>Transaction ID: D32031</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 4501 Burgess House Lane  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23236  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Dominique Walker</b>  |  | <b>Transaction ID: D32802</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 323 Reams Rd.  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Petersburg<br>State VA<br>Zip Code 23805  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 196.00 |
| <b>TOTAL</b> 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 346 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. KristalLee</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 50 Tupelo Circle<br>City Hampton State VA Zip Code 23666<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32141</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>B. SharnellHopkins</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1453 Jennie Scher Rd<br>City Richmond State VA Zip Code 23231<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31847</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>C. MichaelHarris</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3017 Williams Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32419</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 347 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. OrraniaHarris</b>   |  | <b>Transaction ID: D31841</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2124 Crieghton Rd.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Chris Boothe</b>  |  | <b>Transaction ID: D32056</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ValariaLassiter</b>   |  | <b>Transaction ID: D32311</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1615 Darren Dr.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 256.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 348 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. RhondaYoung-Barfield</b>  |  | <b>Transaction ID: D31913</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2215 Fenton St   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23231  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SandraLewis</b>   |  | <b>Transaction ID: D32576</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 544 22nd Street Apt C  |  | Amount of Each Disbursement this Period<br>240.00                       |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Alysson Vogt</b>  |  | <b>Transaction ID: D32103</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 226 C. Street NE #2  |  | Amount of Each Disbursement this Period<br>76.00                        |
| City Washington  | State DC Zip Code 20002  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 376.00 |
| <b>TOTAL</b> 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 349 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BrittanyStewart</b>   |  | <b>Transaction ID: D32062</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SteveRohloff</b>  |  | <b>Transaction ID: D32373</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 6225 Warwick Rd  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond State VA Zip Code 23225  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. NicoleElliott</b>   |  | <b>Transaction ID: D32633</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3400 Brandywine Dr.  |  | Amount of Each Disbursement this Period<br>40.00  |
| City Chesapeake State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 236.00 |
| <b>TOTAL</b> 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 350 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. SylviaJohnson</b>   |  | <b>Transaction ID: D32362</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2533 Bethel St.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JanetLewis</b>  |  | <b>Transaction ID: D32715</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2719 Henrico Dr  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23222  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ReginaldPitts</b>   |  | <b>Transaction ID: D31868</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2220 Rosetta St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 351 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. Fredrika Thomas</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 104 Spring Forrest Ct.<br>Apt. D<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31891</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>B. Glenn Starnes</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N. Lombardy St<br>VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32713</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|--|--|--|

|   |  |   |
|---|--|---|
| <b>C. Rev. Willie Woodson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3401 North Ave.<br>City Richmond State VA Zip Code 23222<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32598</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>370.00<br>Category/Type |
|---|--|---|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 450.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 352 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Kenneth Reid</b>  |  | <b>Transaction ID: D32769</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 830 27th Street  |  | Amount of Each Disbursement this Period<br>65.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Sheldrian Wilims</b>  |  | <b>Transaction ID: D32279</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1014 Bowie Place   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Clifford Barnett, Jr.</b>   |  | <b>Transaction ID: D32209</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2803 Willows Arch  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 305.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AlyciaGardner</b>   |  | <b>Transaction ID: D32581</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3545 Byrnbrae Drive  |  | Amount of Each Disbursement this Period<br>270.00                       |  |
| City Virginia Beach<br>State VA<br>Zip Code 23464  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DominiqueFulgeon</b>  |  | <b>Transaction ID: D32228</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3029 Camelot Blvd.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TonyaGivens</b>   |  | <b>Transaction ID: D31837</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3336 Nine Mile Rd.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 450.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DavidLewis</b>  |  | <b>Transaction ID: D32312</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 4513 Miles Ave.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Suffolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SarahClyburn</b>  |  | <b>Transaction ID: D32399</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1237 Ivy Ave   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AndreaBullock</b>   |  | <b>Transaction ID: D32341</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1823 N. 29th St.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AlphonsoDale Jr.</b>  |  | <b>Transaction ID: D32404</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1103 James Drive   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23605  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. WALTERIAWiliford</b>  |  | <b>Transaction ID: D31902</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1714 Jacquelyn St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23222  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. David John Mills</b>  |  | <b>Transaction ID: D31658</b><br>Date of Disbursement<br>10 / 30 / 2006 |  |
| Mailing Address 2300 East Cary Street<br>Apartment #523  |  | Amount of Each Disbursement this Period<br>1541.48                      |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>Payroll   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1721.48 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. David John Mills</b>  |  | <b>Transaction ID: D31745</b><br>Date of Disbursement<br>11 / 14 / 2006 |
| Mailing Address 2300 East Cary Street<br>Apartment #523  |  | Amount of Each Disbursement this Period<br>1541.48                      |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement Payroll<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Angela Parker</b>   |  | <b>Transaction ID: D32200</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1815 Liberty St.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Chesapeake State VA Zip Code 23324  | Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Kali Matalon</b>  |  | <b>Transaction ID: D32601</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2512 Los Carrales Court  |  | Amount of Each Disbursement this Period<br>420.00                       |
| City Virginia Beach State VA Zip Code 23456  | Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2081.48 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MalindaThornton</b>   |  | <b>Transaction ID: D31991</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 700 Waterfront Circle<br>Apt 1107  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Newport News State VA Zip Code 23607  |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JoeWiggins</b>  |  | <b>Transaction ID: D32656</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1253 36 Street   |  | Amount of Each Disbursement this Period<br>40.00  |
| City Newport News State VA Zip Code 23607  |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DavidValentine</b>  |  | <b>Transaction ID: D32443</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 554 A - 17th Street  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Newport News State VA Zip Code 23607  |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. JimmieWhitby</b>  |  | <b>Transaction ID: D32710</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1716 Terminal Ave  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JimmieWhitby</b>  |  | <b>Transaction ID: D32648</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1716 Terminal Ave  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DanielleFortier</b>   |  | <b>Transaction ID: D32077</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address Frist Campus Center  |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Princeton<br>State NJ<br>Zip Code 8544  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 136.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |   |                   |
|---|-------------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. MarkBailey</b>   |             | <b>Transaction ID: D32079</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |                   |
| Mailing Address    Frist Campus Center  |             | Amount of Each Disbursement this Period<br>76.00  |                   |
| City<br>Princeton   | State<br>NJ | Zip Code<br>8544  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |             | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President                                  |             |   |                   |
| Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | State:                    District:   |                   |

|   |             |   |                   |
|---|-------------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. JaykishaFoster</b>   |             | <b>Transaction ID: D32409</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |                   |
| Mailing Address    528 A 19th Street  |             | Amount of Each Disbursement this Period<br>120.00   |                   |
| City<br>Newport News  | State<br>VA | Zip Code<br>23607   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |             | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President                                  |             |   |                   |
| Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | State:                    District:   |                   |

|   |             |   |                   |
|---|-------------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Jess Dobes</b>   |             | <b>Transaction ID: D32078</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |                   |
| Mailing Address    Frist Campus Center  |             | Amount of Each Disbursement this Period<br>76.00  |                   |
| City<br>Princeton   | State<br>NJ | Zip Code<br>8544  | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |             | Candidate Name  |                   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President                                  |             |   |                   |
| Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | State:                    District:   |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 272.00 |
| <b>TOTAL</b> 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 360 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Nicole Nichols</b>  |  | <b>Transaction ID: D32452</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1305 w 26th St.  |  | Amount of Each Disbursement this Period<br>136.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23508   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. LucilleDorsey</b>   |  | <b>Transaction ID: D31935</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1710 B Ivy Ave   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. LeRhondaPayton</b>  |  | <b>Transaction ID: D32492</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5944 Lockamy Lane  |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 356.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CarolynAllen</b>  |  | <b>Transaction ID: D32287</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1134 Chisholm Cir.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. WhitneyBell</b>   |  | <b>Transaction ID: D31919</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 945 17th Street  |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RichardCleveland`</b>   |  | <b>Transaction ID: D31792</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 316 Killian Ave.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ElissaHarwood</b>   |  | <b>Transaction ID: D32599</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 808 Bishops Gate Lane  |  | Amount of Each Disbursement this Period<br>420.00   |
| City Virginia Beach  | State VA Zip Code 23452  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Tammy Jenkins</b>   |  | <b>Transaction ID: D32118</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1332 Tree Ridge Rd.  |  | Amount of Each Disbursement this Period<br>80.00  |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. KashaiaLundy</b>  |  | <b>Transaction ID: D32367</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 104 Spring Forrest Ct. Apt. D  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 620.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. VincentRoss</b>  |                  | <b>Transaction ID: D32735</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 490 Orcutt Lane   |                  | Amount of Each Disbursement this Period<br>20.00   |                   |
| City Richmond   | State VA         | Zip Code 23224   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. MauriceKing</b>  |                  | <b>Transaction ID: D32365</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 4910 Greenleigh Rd.   |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Richmond   | State VA         | Zip Code 23223   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. JamesMinor</b>   |                  | <b>Transaction ID: D32613</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 900 N. 35th Street  |                  | Amount of Each Disbursement this Period<br>722.00  |                   |
| City Richmond   | State VA         | Zip Code 23223   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 862.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. IrvingBowser</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2726 High St.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32291</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|   |  |   |
|---|--|---|
| <b>B. LashaunHudson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N. Lombardy St VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32174</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>100.00<br>Category/Type |
|---|--|---|

|  |  |   |
|--|--|---|
| <b>C. BarbaraScott</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2345 Selden St.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32377</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. JosephSuddith</b><br>Full Name (Last, First, Middle Initial)   |  | <b>Transaction ID: D32016</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2712 Mulberry Loop   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| <b>B. PhillipWilliams</b><br>Full Name (Last, First, Middle Initial)   |  | <b>Transaction ID: D32330</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1114 Alcindor Rd.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| <b>C. Ashley Frierson</b><br>Full Name (Last, First, Middle Initial)   |  | <b>Transaction ID: D32795</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 11270 Lamore Dr.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Disputana<br>State VA<br>Zip Code 23875   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Marilyn Lewis</b>   |  | <b>Transaction ID: D32668</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 545 21st Street<br>Apt A   |  | Amount of Each Disbursement this Period<br>65.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Cardel Patillo</b>  |  | <b>Transaction ID: D31735</b><br>Date of Disbursement<br>11 / 04 / 2006 |  |
| Mailing Address 506 Roosevelt Blvd   |  | Amount of Each Disbursement this Period<br>3000.00                      |  |
| City Portsmouth<br>State VA<br>Zip Code 23701  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Shirley Rouse</b>   |  | <b>Transaction ID: D32374</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 111 Mosby St.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>3185.00</b> |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Tyra Smith</b>  |  | <b>Transaction ID: D31883</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4647-D Southwood Pwky  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Brianna Wimbush</b>   |  | <b>Transaction ID: D32804</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address PO Box 3135  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Petersburg State VA Zip Code 23805  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. PatrickShaughnessy</b>  |  | <b>Transaction ID: D31878</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 6225 Warrick Rd  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23224  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 180.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Luke Olszewski</b>  |  | <b>Transaction ID: D31717</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6  |
| Mailing Address 2228 Sands Woods Lane  |  | Amount of Each Disbursement this Period<br>45.00   |
| City Virginia Beach State VA Zip Code 23456  | Purpose of Disbursement<br>GOTV Stipend<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MarilynOlds</b>   |   | <b>Transaction ID: D32120</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address 3308 Nine Mile Rd.   |   | Amount of Each Disbursement this Period<br>80.00   |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DujunBrooks</b>   |   | <b>Transaction ID: D32032</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |
| Mailing Address 1500 N Lombardy Street<br>VUU  |   | Amount of Each Disbursement this Period<br>76.00   |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 201.00 |
| <b>TOTAL</b> 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 369 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. EvanNovak</b>   |  | <b>Transaction ID: D32012</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 513 Appaloosa Trail  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Chesapeake<br>State VA<br>Zip Code 23323  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. IsmaelAquilar</b>   |  | <b>Transaction ID: D31915</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 814 21st Street  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. LytonyaEchols</b>   |  | <b>Transaction ID: D32618</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address P.O. Box 7813  |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 160.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RobinLee</b>  |  | <b>Transaction ID: D32142</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 50 Tupelo Circle   |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Hampton<br>State VA<br>Zip Code 23666   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JulieSoloman</b>  |  | <b>Transaction ID: D32380</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 3601 Edgeton Circle  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Bernard Robinson</b>  |  | <b>Transaction ID: D32147</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1130 37th Street   |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 371 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TenilleClyburn</b>  |  | <b>Transaction ID: D32570</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 531 19th Street<br>Apt B   |  | Amount of Each Disbursement this Period<br>220.00                       |
| City Newport News<br>State VA<br>Zip Code 23607  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ClaireChapman</b>   |  | <b>Transaction ID: D32650</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 21110 W. Cary St   |  | Amount of Each Disbursement this Period<br>40.00                        |
| City Richmond<br>State VA<br>Zip Code 23220  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CarlosPhipps</b>  |  | <b>Transaction ID: D32176</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>100.00                       |
| City Richmond<br>State VA<br>Zip Code 23220  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00 |
| <b>TOTAL</b> 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 372 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Time Plus Payroll</b>   |  | <b>Transaction ID:</b> D31664<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 3 0 / 2 0 0 6 |
| Mailing Address 3920 Pump Rd., Ste. 125  |  | Amount of Each Disbursement this Period<br>70.50   |
| City Richmond State VA Zip Code 23233  | Purpose of Disbursement<br>Payroll Processing Fees<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Time Plus Payroll</b>   |  | <b>Transaction ID:</b> D31744<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 1 4 / 2 0 0 6 |
| Mailing Address 3920 Pump Rd., Ste. 125  |  | Amount of Each Disbursement this Period<br>67.45   |
| City Richmond State VA Zip Code 23233  | Purpose of Disbursement<br>Payroll Processing Fees<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Billy Marshall</b>  |  | <b>Transaction ID:</b> D32600<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2224 Sandy Woods Lane  |  | Amount of Each Disbursement this Period<br>420.00  |
| City Virginia Beach State VA Zip Code 23456  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 557.95 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Lisa West</b>   |  | <b>Transaction ID: D32639</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 5815 Frament Ave Apt.104   |  | Amount of Each Disbursement this Period<br>40.00                        |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement GOTV Worker<br>Candidate Name <input type="checkbox"/> Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ClementNdihah</b>   |  | <b>Transaction ID: D32167</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 4501 Burgess House Lane  |  | Amount of Each Disbursement this Period<br>100.00                       |
| City Richmond State VA Zip Code 23236  | Purpose of Disbursement GOTV Worker<br>Candidate Name <input type="checkbox"/> Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DavidKeyes</b>  |  | <b>Transaction ID: D31856</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 6255 Warwick Rd.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond State VA Zip Code 23225  | Purpose of Disbursement GOTV Worker<br>Candidate Name <input type="checkbox"/> Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 200.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. QuincyWhite</b>   |  | <b>Transaction ID: D32057</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VJU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TiffanyGibbs</b>  |  | <b>Transaction ID: D32503</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5384 Hanyen Dr.  |  | Amount of Each Disbursement this Period<br>160.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. RobertoIngrao</b>   |  | <b>Transaction ID: D32051</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 710 W. Franklin St   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 312.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Rev. WillieWoodson</b>  |  | <b>Transaction ID: D32662</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3401 North Ave.  |  | Amount of Each Disbursement this Period<br>65.00                        |
| City Richmond  | State VA Zip Code 23222  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SandraFrancis</b>   |  | <b>Transaction ID: D32515</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 4910 Greenliegh Rd.  |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DanielleGreene</b>  |  | <b>Transaction ID: D32583</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address Hampton University   |  | Amount of Each Disbursement this Period<br>270.00                       |
| City Hampton   | State VA Zip Code 23668  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 495.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Gregory Scanlon</b>   |  | <b>Transaction ID: D31661</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 3 0 / 2 0 0 6 |
| Mailing Address 1809 E Grace St #8   |  | Amount of Each Disbursement this Period<br>1302.23  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement Payroll<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Gregory Scanlon</b>   |  | <b>Transaction ID: D31748</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 4 / 2 0 0 6 |
| Mailing Address 1809 E Grace St #8   |  | Amount of Each Disbursement this Period<br>1302.23  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement Payroll<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BreahHarrison</b>   |  | <b>Transaction ID: D32307</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 5384 Hanyen Dr.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Category/Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2724.46     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 377 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CardellPatillo,Jr.</b>  |  | <b>Transaction ID: D32759</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 506 Roosevelt Blvd.  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ChenaloLewis</b>  |  | <b>Transaction ID: D32548</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1716 Terminal Ave  |  | Amount of Each Disbursement this Period<br>180.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DarrellVanLoo</b>   |  | <b>Transaction ID: D31894</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 801 Sheppard St.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23221  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 378 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Elizabeth Hare</b>  |  | <b>Transaction ID: D31718</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |  |
| Mailing Address 611 Oleander Circle  |  | Amount of Each Disbursement this Period<br>45.00  |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>GOTV Stipend  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JazmineWilliams</b>   |  | <b>Transaction ID: D32001</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 106 Whimbrel Drive   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Suffolk<br>State VA<br>Zip Code 23435   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. SandreDebrew</b>  |  | <b>Transaction ID: D32540</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 544 C 22nd Street  |  | Amount of Each Disbursement this Period<br>180.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 285.00 |
| <b>TOTAL</b> 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 379 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. DelmonSpain</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2311 Yorktown Rd<br>City Richmond State VA Zip Code 23234<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32038</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>B. LonnieNewell</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 535 22nd Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31975</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>C. SheilaSanders</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 143 Libbey Street<br>City Hampton State VA Zip Code 23663<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32585</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>270.00<br>Category/Type |
|--|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 406.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 380 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ToddPickle</b>  |  | <b>Transaction ID: D32261</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3704 Elkhorn Ave., # A   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BilalAbdullah</b>   |  | <b>Transaction ID: D32130</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2101 Jefferson Ave   |  | Amount of Each Disbursement this Period<br>80.00                        |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Nathaniel Phillips</b>  |  | <b>Transaction ID: D32202</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 4010 Scotchwood Ct.  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Chesapeake State VA Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Audrey Keeling</b>  |  | <b>Transaction ID: D32241</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 7856 Woodall Rd.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Caressa Jennings</b>  |  | <b>Transaction ID: D32068</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St VUU  |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Marilyn Taylor</b>  |  | <b>Transaction ID: D32518</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 103 South Lake Ave.  |  | Amount of Each Disbursement this Period<br>160.00   |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 356.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. SharondaDrew</b>  |  | <b>Transaction ID: D31937</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1555 Ridley Circle   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MauriceRobinson</b>   |  | <b>Transaction ID: D32748</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2521 Bethel St.  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AubryBrown</b>  |  | <b>Transaction ID: D32396</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 719 Woodfin Road   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23605  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 383 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ChristinaBanks</b>  |  | <b>Transaction ID: D32640</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2200 Orcutt Ave  |  | Amount of Each Disbursement this Period<br>40.00  |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DouglasChapman</b>  |  | <b>Transaction ID: D32295</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2910 Woodrow St.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. SeanEvans</b>   |  | <b>Transaction ID: D31833</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2913 Haynes Ave.   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond  | State VA Zip Code 23222  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 384 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Daniel Thornton</b>   |  | <b>Transaction ID: D32555</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 830 27th Street  |  | Amount of Each Disbursement this Period<br>180.00                       |
| City Newport News  | State VA Zip Code 23607  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Joseph Williams</b>   |  | <b>Transaction ID: D32128</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2414 North 28th Street   |  | Amount of Each Disbursement this Period<br>80.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Jamal Bryant</b>  |  | <b>Transaction ID: D32292</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1505 Ellington Sq.   |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 380.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Annette Bullock</b>   |  | <b>Transaction ID: D32674</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1823 N. 29th Street  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Daloka Harris</b>   |  | <b>Transaction ID: D32797</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 6301 Edge Wood Dr.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Disputana<br>State VA<br>Zip Code 23842   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Alexander Williams</b>  |  | <b>Transaction ID: D32067</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name<br>Category/Type  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 156.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 386 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Yvonne Tunstall</b>   |  | <b>Transaction ID: D32519</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2913 Hanes Ave.  |  | Amount of Each Disbursement this Period<br>160.00   |
| City Richmond  | State VA   |   |
| Zip Code 23222   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Joshua Jones</b>  |  | <b>Transaction ID: D31599</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 1 9 / 2 0 0 6 |
| Mailing Address 919 Druid Cir Apt 7  |  | Amount of Each Disbursement this Period<br>220.00   |
| City Norfolk   | State VA   |   |
| Zip Code 23504   |  |   |
| Purpose of Disbursement<br>Canvassing Stipend  |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Joshua Jones</b>  |  | <b>Transaction ID: D31712</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 919 Druid Cir Apt 7  |  | Amount of Each Disbursement this Period<br>550.00   |
| City Norfolk   | State VA   |   |
| Zip Code 23504   |  |   |
| Purpose of Disbursement<br>GOTV Stipend  |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 930.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KellyDuck</b>   |  | <b>Transaction ID: D32405</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 801 Lassiter Dr.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KaiaGrant</b>   |  | <b>Transaction ID: D32559</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 73 Chestnut Ave.   |  | Amount of Each Disbursement this Period<br>180.00                       |  |
| City Cincinnati<br>State OH<br>Zip Code 45215  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ShatonyaHunter</b>  |  | <b>Transaction ID: D32702</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 935 37th Street<br>Apt 7   |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Doug Rhoades</b>  |  | <b>Transaction ID:</b> D32150<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2313 B Westwood Ave.   |  | Amount of Each Disbursement this Period<br>80.00   |
| City Richmond State VA Zip Code 23230  | Category/<br>Type  |  |
| Purpose of Disbursement<br>GOTV Worker   |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Charnaë Clark</b>   |  | <b>Transaction ID:</b> D32216<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4240 Sedgewyck Circle  |  | Amount of Each Disbursement this Period<br>120.00  |
| City Portsmouth State VA Zip Code 23324  | Category/<br>Type  |  |
| Purpose of Disbursement<br>GOTV Worker   |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Beverly Davis</b>   |  | <b>Transaction ID:</b> D31793<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 405 Russell St.  |  | Amount of Each Disbursement this Period<br>120.00  |
| City Portsmouth State VA Zip Code 23324  | Category/<br>Type  |  |
| Purpose of Disbursement<br>GOTV Worker   |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. GerardDowning</b>   |  | <b>Transaction ID: D32221</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 7435 Hooper St.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MaryClark</b>   |  | <b>Transaction ID: D32558</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5711 Colter Ct.  |  | Amount of Each Disbursement this Period<br>180.00                       |  |
| City Virginia Beach<br>State VA<br>Zip Code 23462  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AshleySaunders</b>  |  | <b>Transaction ID: D32267</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 208 Wynn Street  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 420.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. NehretteWashington</b>  |  | <b>Transaction ID: D32751</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1102 Williamsburg Rd   |  | Amount of Each Disbursement this Period<br>40.00  |
| City Richmond State VA Zip Code 23231  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WilliamHenry</b>  |  | <b>Transaction ID: D32234</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 4240 Sedgewyck Circle  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TerrenceLittle</b>  |  | <b>Transaction ID: D32055</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 236.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MauriceRobinson</b>   |  | <b>Transaction ID: D32516</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2521 Bethel St.  |  | Amount of Each Disbursement this Period<br>160.00                       |
| City Richmond  | State VA   |   |
| Zip Code 23223   | Category/Type  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JohnFitzgerald</b>  |  | <b>Transaction ID: D31834</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2518 Bethel St.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA   |   |
| Zip Code 23223   | Category/Type  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. JohnFitzgerald</b>  |  | <b>Transaction ID: D31835</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2518 Bethel St.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA   |   |
| Zip Code 23223   | Category/Type  |   |
| Purpose of Disbursement GOTV Worker<br>Candidate Name  |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 392 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Andrew Cotman</b>   |  | <b>Transaction ID: D31826</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2122 Accomodation St.  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA   |   |
| Zip Code 23223   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Claudine Fousch</b>   |  | <b>Transaction ID: D32089</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3207 Appleford Drive   |  | Amount of Each Disbursement this Period<br>76.00                        |
| City Chester   | State VA   |   |
| Zip Code 23831   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Andre Jackson</b>   |  | <b>Transaction ID: D32622</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1421 Sir-Kay Drive   |  | Amount of Each Disbursement this Period<br>40.00                        |
| City Chesapeake  | State VA   |   |
| Zip Code 23324   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 176.00 |
| <b>TOTAL</b> 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 393 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. NyemaDorsey</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 101 Ironbridge Court #303<br>City Hampton State VA Zip Code 23663<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32700</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>B. Lillian Hayes</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2306 Hildreth Street<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32115</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>80.00<br>Category/Type |
|--|--|--|

|  |  |  |
|--|--|--|
| <b>C. Billie Marshall</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2224 Sandy Woods Lane<br>City Virginia Beach State VA Zip Code 23456<br>Purpose of Disbursement GOTV Stipend<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31715</b><br>Date of Disbursement<br>11 / 04 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|--|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 140.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ErickaPhillips</b>  |  | <b>Transaction ID: D31977</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 559A Blue Point Terrace  |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23602  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. EricaBurton</b>   |  | <b>Transaction ID: D31791</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1311 E. Oceanview Ave.<br>Unit E3  |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JessieRoyster</b>   |  | <b>Transaction ID: D32375</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1012 St. James St.   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond<br>State VA<br>Zip Code 23210  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| <b>A. ShemeccaWright</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 712 Crabapple St.<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32333</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|  |  |  |
|--|--|--|
| <b>B. SusanHaskins</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2355 Selden St.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31842</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|--|--|--|

|   |  |   |
|---|--|---|
| <b>C. EbonyPicott</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 651 21st Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32434</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DaShawnJohnson</b>  |  | <b>Transaction ID: D31958</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 549 F 21st   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. WestlyYoung</b>   |  | <b>Transaction ID: D31912</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1935 Repp Circle   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Highland Springs<br>State VA<br>Zip Code 23075  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Tara Rabuck</b>   |  | <b>Transaction ID: D31742</b><br>Date of Disbursement<br>11 / 06 / 2006 |  |
| Mailing Address 2620 Dumbarton Rd  |  | Amount of Each Disbursement this Period<br>3375.00                      |  |
| City Richmond<br>State VA<br>Zip Code 23228  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>3495.00</b> |
| <b>TOTAL</b> 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 397 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MoeshaClyburn</b>   |  | <b>Transaction ID: D32397</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1106 78th Street   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Newport News State VA Zip Code 23607  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Sparkle Jenkins</b>   |  | <b>Transaction ID: D31723</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6 |
| Mailing Address 1428 W 27th St APT A   |  | Amount of Each Disbursement this Period<br>90.00  |
| City Norfolk State VA Zip Code 23508-2330  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Stipend  |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Ian Jordan</b>  |  | <b>Transaction ID: D32157</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1445 Reynard Crescent  |  | Amount of Each Disbursement this Period<br>90.00  |
| City Virginia Beach State VA Zip Code 23451  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 300.00 |
| <b>TOTAL</b> 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 398 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |  |
|---|--|--|
| <b>A. ThadtigussLewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 545 A 21st Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31966</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|   |  |   |
|---|--|---|
| <b>B. NubiaEtheridge</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1403 Ekstine Drive<br>City Portsmouth State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32223</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

|   |  |   |
|---|--|---|
| <b>C. JolynLewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 545A 21st Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32549</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>180.00<br>Category/Type |
|---|--|---|

|  |             |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 399 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. Ralene Browder</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 537 Cedar Rd.<br>City Chesapeake State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32755</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|--|

|  |  |   |
|--|--|---|
| <b>B. Nathaniel Watkins</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 612 N Hancock St<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32165</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>100.00<br>Category/Type |
|--|--|---|

|  |  |   |
|--|--|---|
| <b>C. Jerry Pickle</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3704 Elkhorn Ave., # A<br>City Norfolk State VA Zip Code 23324<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32259</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|--|--|---|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 260.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 400 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AnnetteClark</b>  |  | <b>Transaction ID: D32614</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 4240 Sedgewyck Circle  |  | Amount of Each Disbursement this Period<br>40.00  |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. EyondaRichardson</b>  |  | <b>Transaction ID: D31981</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1537 A Jefferson Ave   |  | Amount of Each Disbursement this Period<br>60.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ClintonBryant</b>   |  | <b>Transaction ID: D32666</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 2101 12C Kecoughtan  |  | Amount of Each Disbursement this Period<br>65.00  |  |
| City Hampton<br>State VA<br>Zip Code 23661   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 165.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 401 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Arkeisha Whitley</b>  |  | <b>Transaction ID: D31779</b><br>Date of Disbursement<br>11 / 27 / 2006 |  |
| Mailing Address 52 George St   |  | Amount of Each Disbursement this Period<br>600.00                       |  |
| City Hampton<br>State VA<br>Zip Code 23663   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SterlingSharp</b>   |  | <b>Transaction ID: D32323</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 901 Ellington Sq.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. KendraJohnson</b>   |  | <b>Transaction ID: D31853</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 2601 Kensington Ave.   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 780.00 |
| <b>TOTAL</b> 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 402 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <p><b>A. LiceniaWade</b></p> <p>Full Name (Last, First, Middle Initial)<br/>LiceniaWade</p> <p>Mailing Address 1500 N. Lombardy St<br/>VJU</p> <p>City Richmond State VA Zip Code 23220</p> <p>Purpose of Disbursement GOTV Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D32070</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="76.00"/></p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>   |  |  |

|  |  |  |
|--|--|--|
| <p><b>B. Angelique Byers</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Angelique Byers</p> <p>Mailing Address 3225 Field Rd</p> <p>City Petersburg State VA Zip Code 23805</p> <p>Purpose of Disbursement GOTV Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D32794</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>   |  |  |

|   |  |  |
|---|--|--|
| <p><b>C. Kerbe Glenn</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Kerbe Glenn</p> <p>Mailing Address 2222 E. Cary St.</p> <p>City Richmond State VA Zip Code 23223</p> <p>Purpose of Disbursement GOTV Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: D32114</b></p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.00"/></p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>  |  |  |

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|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="216.00"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                |

# 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 403 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. SimoneDreher</b>  |  | <b>Transaction ID: D32133</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 143 Town Sq Drive  |  | Amount of Each Disbursement this Period<br>80.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. RavenMyles</b>  |  | <b>Transaction ID: D32315</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 808 Bold St.   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ChristineMiller</b>   |  | <b>Transaction ID: D32766</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1322 22nd Street   |  | Amount of Each Disbursement this Period<br>65.00  |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 265.00 |
| <b>TOTAL</b> 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 404 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Willie MaeClyburn</b>   |  | <b>Transaction ID: D32402</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1706 Terminal Ave  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AnnScott</b>  |  | <b>Transaction ID: D32626</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 7721 Harrison Rd.  |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Leon DHutchinson</b>  |  | <b>Transaction ID: D32489</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 729 Greenwing Drive  |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Candidate Name  |  |

|  |        |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 320.00 |
| <b>TOTAL</b> 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 405 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |   |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>LilieEstes</p> |   | <p><b>Transaction ID:</b> D32513<br/><b>Date of Disbursement</b><br/> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> |   | M      | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 0 | 7 | / | 2 | 0 | 0 | 6 |
| M   | M   | /  | D | D      | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 1   | 1   | /  | 0 | 7      | / | 2 | 0 | 0 | 6 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Mailing Address PO Box 6096</p>                                      |   | <p>Amount of Each Disbursement this Period<br/> <table border="1"> <tr> <td>160.00</td> </tr> </table> </p>  |   | 160.00 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 160.00  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>City Richmond State VA Zip Code 23223</p>                            | <p>Purpose of Disbursement<br/>GOTV Worker</p>  | <p>Category/<br/>Type</p>  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Candidate Name</p>   | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>                 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br/>                 State: District:</p> |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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|---|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>CarolynWhitehood</p> |   | <p><b>Transaction ID:</b> D32596<br/><b>Date of Disbursement</b><br/> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> |   | M      | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 0 | 7 | / | 2 | 0 | 0 | 6 |
| M   | M   | /  | D | D      | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 1   | 1   | /  | 0 | 7      | / | 2 | 0 | 0 | 6 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Mailing Address 3221 Dogwood Dr.</p>                                       |   | <p>Amount of Each Disbursement this Period<br/> <table border="1"> <tr> <td>360.00</td> </tr> </table> </p>  |   | 360.00 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 360.00  |   |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>City Portsmouth State VA Zip Code 23703</p>                                | <p>Purpose of Disbursement<br/>GOTV Worker</p>  | <p>Category/<br/>Type</p>  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Candidate Name</p>   | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>                 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br/>                 State: District:</p> |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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|--|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>BridgetFitzgerald</p> |   | <p><b>Transaction ID:</b> D32348<br/><b>Date of Disbursement</b><br/> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> |   | M      | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 0 | 7 | / | 2 | 0 | 0 | 6 |
| M  | M   | /  | D | D      | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 1  | 1   | /  | 0 | 7      | / | 2 | 0 | 0 | 6 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Mailing Address 1017 St. John St.</p>                                       |   | <p>Amount of Each Disbursement this Period<br/> <table border="1"> <tr> <td>120.00</td> </tr> </table> </p>  |   | 120.00 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 120.00   |   |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>City Richmond State VA Zip Code 23220</p>                                   | <p>Purpose of Disbursement<br/>GOTV Worker</p>  | <p>Category/<br/>Type</p>  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <p>Candidate Name</p>  | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>                 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br/>                 State: District:</p> |  |   |        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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|---|---------------|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p>640.00</p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> |               |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. LaDonyaWinston</b>  |  | <b>Transaction ID: D32604</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1045 West 37th St.   |  | Amount of Each Disbursement this Period<br>420.00                       |
| City Norfolk   | State VA Zip Code 23508  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JoyceJohnson</b>  |  | <b>Transaction ID: D32686</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2309 Crighton Rd.  |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AliciaCastro</b>  |  | <b>Transaction ID: D32345</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2516 Bethel St.  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 560.00 |
| <b>TOTAL</b> 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 407 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KianaHinton</b>   |  | <b>Transaction ID: D32236</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 837 Barker Road  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. LakeishaWashington</b>  |  | <b>Transaction ID: D32278</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1014 Bowie Place   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DominiqueMeredith</b>   |  | <b>Transaction ID: D32432</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 612 30th   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 408 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |
|---|--|---|
| <b>A. JamesJohnson</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1813 Moore ST.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32359</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

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|--|--|---|
| <b>B. PamelaGrarnette</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 8221 Whistler Road<br>City Richmond State VA Zip Code 23227<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32179</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>100.00<br>Category/Type |
|--|--|---|

|  |  |   |
|--|--|---|
| <b>C. BrentMcKenzie</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1400 Brookwood Place<br>City Virginia Beach State VA Zip Code 23453<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32536</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>170.00<br>Category/Type |
|--|--|---|

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 390.00 |
| <b>TOTAL</b> 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 409 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AlexColeman</b>   |  | <b>Transaction ID: D32296</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 808 Bold St.   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Portsmouth State VA Zip Code 23324  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JosalynColeman</b>  |  | <b>Transaction ID: D32102</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address GRC #485B<br>711 West Main Street  |  | Amount of Each Disbursement this Period<br>76.00  |
| City Richmond State VA Zip Code 23220  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Tiana Burnes</b>  |  | <b>Transaction ID: D32213</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2322 Rush Street   |  | Amount of Each Disbursement this Period<br>120.00   |
| City Norfolk State VA Zip Code 23324   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>316.00</b> |
| <b>TOTAL</b> 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 410 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |   |
|---|--|---|
| <b>A. MarilynLewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 545 21st Street<br>Apt A<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32575</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>240.00<br>Category/Type |
|---|--|---|

|  |  |  |
|--|--|--|
| <b>B. AshleyAkridge</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1500 N. Lombardy St<br>VUU<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32046</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>76.00<br>Category/Type |
|--|--|--|

|   |  |  |
|---|--|--|
| <b>C. HubbardBrown</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 5217 Campbell Ave.<br>City Richmond State VA Zip Code 23231<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D31817</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>60.00<br>Category/Type |
|---|--|--|

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 376.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 411 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TacoryScott</b>   |  | <b>Transaction ID: D32148</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |  |
| Mailing Address 1032 Hampton Ave.  |  | Amount of Each Disbursement this Period<br>80.00   |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker | Category/<br>Type  |  |
| Candidate Name   |  | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: |  |
| Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Lauren Marshuk</b>  |   | <b>Transaction ID: D31722</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 4 / 2 0 0 6  |  |
| Mailing Address 3148 Barbour Dr  |   | Amount of Each Disbursement this Period<br>45.00   |  |
| City Willis Wharf<br>State VA<br>Zip Code 23486  | Purpose of Disbursement<br>GOTV Stipend | Category/<br>Type  |  |
| Candidate Name   |   | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: |  |
| Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NatalieClark</b>  |  | <b>Transaction ID: D32108</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |  |
| Mailing Address 7123 Polegreen Rd.   |  | Amount of Each Disbursement this Period<br>80.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker | Category/<br>Type  |  |
| Candidate Name   |  | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: |  |
| Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 205.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ShermanCotman</b>   |  | <b>Transaction ID: D32347</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2221 Fairfield Ave.  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Warren Richards</b>   |  | <b>Transaction ID: D31741</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 919 Druid Cir Apt #7   |  | Amount of Each Disbursement this Period<br>933.00   |
| City Norfolk State VA Zip Code 23504   | Purpose of Disbursement<br>Payroll   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Warren Richards</b>   |  | <b>Transaction ID: D31767</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6 |
| Mailing Address 919 Druid Cir Apt #7   |  | Amount of Each Disbursement this Period<br>933.00   |
| City Norfolk State VA Zip Code 23504   | Purpose of Disbursement<br>Payroll   |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1986.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. SamTunstall</b>   |  | <b>Transaction ID: D32385</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3601 Edgeton Circle  |  | Amount of Each Disbursement this Period<br>120.00   |
| City Richmond  | State VA   |   |
| Zip Code 23223   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DouglasHicks</b>  |  | <b>Transaction ID: D31845</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2518 Bethel St.  |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond  | State VA   |   |
| Zip Code 23223   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. GaryBeauchamp</b>   |  | <b>Transaction ID: D32154</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2477 Las Brisas Drive  |  | Amount of Each Disbursement this Period<br>90.00  |
| City Virginia Beach  | State VA   |   |
| Zip Code 23456   |  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  | Category/<br>Type   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 270.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. JeremiahWiggins</b>   |  | <b>Transaction ID: D32569</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 534#C 21st   |  | Amount of Each Disbursement this Period<br>200.00                       |
| City Newport News<br>State VA<br>Zip Code 23607  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BryanTaylor</b>   |  | <b>Transaction ID: D32593</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 443 Maryland Ave.  |  | Amount of Each Disbursement this Period<br>360.00                       |
| City Norfolk<br>State VA<br>Zip Code 23508   | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mack Crouse Group</b>   |  | <b>Transaction ID: D31635</b><br>Date of Disbursement<br>10 / 24 / 2006 |
| Mailing Address 308 N View Terrace   |  | Amount of Each Disbursement this Period<br>7350.00                      |
| City Alexandria<br>State VA<br>Zip Code 22301  | Category/<br>Type  |   |
| Purpose of Disbursement<br>GOTV Doorhanger   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>7910.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box]    |

# 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 415 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mack Crouse Group</b>   |  | <b>Transaction ID: D31638</b><br>Date of Disbursement<br>10 / 25 / 2006 |
| Mailing Address 308 N View Terrace   |  | Amount of Each Disbursement this Period<br>7875.00                      |
| City Alexandria State VA Zip Code 22301  | Purpose of Disbursement<br>Exempt Grassroots Campaign Materials<br>Candidate Name  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MichaelHyman</b>  |  | <b>Transaction ID: D32684</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1805 Q st.   |  | Amount of Each Disbursement this Period<br>20.00                        |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TyshonLewis</b>   |  | <b>Transaction ID: D31967</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 544 22nd St  |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Newport News State VA Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 7955.00 |
| <b>TOTAL</b> 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 416 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ErnestineDavis</b>  |  | <b>Transaction ID: D32220</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 641 W. 34th Street   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AndrewChapman</b>   |  | <b>Transaction ID: D32499</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address P.O. Box 216   |  | Amount of Each Disbursement this Period<br>160.00   |  |
| City Portsmouth<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RoderyckBullock</b>   |  | <b>Transaction ID: D32342</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |  |
| Mailing Address 1604 N. 28th St.   |  | Amount of Each Disbursement this Period<br>120.00   |  |
| City Richmond<br>State VA<br>Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 400.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. JakariBarnes</b>  |  | <b>Transaction ID: D31916</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 16 Ridley Circle   |  | Amount of Each Disbursement this Period<br>60.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. E. HowardMacklin II</b>   |  | <b>Transaction ID: D32571</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 5 Gregory Court  |  | Amount of Each Disbursement this Period<br>220.00                       |  |
| City Hampton<br>State VA<br>Zip Code 23669   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JaniceLuter</b>   |  | <b>Transaction ID: D32431</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 717 20th Street  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 400.00 |
| <b>TOTAL</b> 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 418 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. MariaAllen</b>   |                  | <b>Transaction ID: D32335</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 2518 Bethel St.   |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Richmond   | State VA         | Zip Code 23223   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. RyantCarr</b>  |                  | <b>Transaction ID: D32294</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 723 South St.<br>Apt. B   |                  | Amount of Each Disbursement this Period<br>120.00  |                   |
| City Portsmouth   | State VA         | Zip Code 23324   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

|   |                  |  |                   |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. JackieCoker</b>  |                  | <b>Transaction ID: D32652</b><br>Date of Disbursement<br>11 / 07 / 2006  |                   |
| Mailing Address 1500 N. Lombardy St<br>VUU  |                  | Amount of Each Disbursement this Period<br>40.00   |                   |
| City Richmond   | State VA         | Zip Code 23220   | Category/<br>Type |
| Purpose of Disbursement<br>GOTV Worker  |                  | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name  |                  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District: |  |                   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |  |
|--|--|--|
| <b>A. JermonStokes</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 807 W. Broad Street<br>City Richmond State VA Zip Code 23220<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32736</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>20.00<br>Category/Type |
|--|--|--|

|   |  |   |
|---|--|---|
| <b>B. TiffanySpencer</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1113 77th Street<br>City Newport News State VA Zip Code 23607<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32441</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>120.00<br>Category/Type |
|---|--|---|

|   |  |  |
|---|--|--|
| <b>C. SandraFrancis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 4910 Greenliegh Rd.<br>City Richmond State VA Zip Code 23223<br>Purpose of Disbursement GOTV Worker<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D32747</b><br>Date of Disbursement<br>11 / 07 / 2006<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|---|--|--|

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 180.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Tracy Pickle</b>  |  | <b>Transaction ID: D32493</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 3704 Elkhorn Ave., # A   |  | Amount of Each Disbursement this Period<br>160.00   |
| City Norfolk State VA Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DavanaYoung</b>   |  | <b>Transaction ID: D32459</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2521 Bethel St.  |  | Amount of Each Disbursement this Period<br>140.00   |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Varneta Smith</b>   |  | <b>Transaction ID: D31884</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1935 Repp Circle   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Highland Springs State VA Zip Code 23075  | Purpose of Disbursement<br>GOTV Worker   |   |
| Candidate Name   |  | Category/Type   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 360.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....  |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. EvelyenGivens</b>   |  | <b>Transaction ID: D31836</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3336 Nine Mile Rd.   |  | Amount of Each Disbursement this Period<br>60.00                        |
| City Richmond  | State VA Zip Code 23223  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MarquitaMcConico</b>  |  | <b>Transaction ID: D32636</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 228 Chowan Trace Apt. B  |  | Amount of Each Disbursement this Period<br>40.00                        |
| City Portsmouth  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. RamonClyburn</b>  |  | <b>Transaction ID: D32539</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 545 Adams Dr. Apt 1B   |  | Amount of Each Disbursement this Period<br>180.00                       |
| City Newport News  | State VA Zip Code 23601  |   |
| Purpose of Disbursement<br>GOTV Worker   |  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

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|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 280.00 |
| <b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DerekHyman</b>  |  | <b>Transaction ID: D32645</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 1333 28th Street   |  | Amount of Each Disbursement this Period<br>40.00                        |  |
| City Newport News<br>State VA<br>Zip Code 23607  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JakeHolmes</b>  |  | <b>Transaction ID: D32683</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 6255 Warwick Rd  |  | Amount of Each Disbursement this Period<br>20.00                        |  |
| City Richmond<br>State VA<br>Zip Code 23225  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Charlie Bryant</b>  |  | <b>Transaction ID: D32481</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 7041 Mamie Blvd.   |  | Amount of Each Disbursement this Period<br>160.00                       |  |
| City Norfolk<br>State VA<br>Zip Code 23324   | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 220.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 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 checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TerahJohnson</b>  |  | <b>Transaction ID: D32178</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 2921 Hilliard Rd   |  | Amount of Each Disbursement this Period<br>100.00                       |
| City Richmond  | State VA Zip Code 23228  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TrynettaWiggins</b>   |  | <b>Transaction ID: D32206</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 1311 E. Oceanview Ave.<br>Unit E3  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Norfolk   | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DeshawnGreene</b>   |  | <b>Transaction ID: D32305</b><br>Date of Disbursement<br>11 / 07 / 2006 |
| Mailing Address 3112 Gaston Dr.  |  | Amount of Each Disbursement this Period<br>120.00                       |
| City Chesapeake  | State VA Zip Code 23324  |   |
| Purpose of Disbursement<br>GOTV Worker   |  | Category/<br>Type   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |  |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 340.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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 424 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PatriceBaltimore</b>  |  | <b>Transaction ID:</b> D32170<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 1500 N. Lombardy St<br>VUU   |  | Amount of Each Disbursement this Period<br>100.00   |
| City Richmond State VA Zip Code 23220  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JoyceJohnson</b>  |  | <b>Transaction ID:</b> D32119<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2309 Crighton Rd.  |  | Amount of Each Disbursement this Period<br>80.00  |
| City Richmond State VA Zip Code 23223  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Michael Barfield</b>  |  | <b>Transaction ID:</b> D31807<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6 |
| Mailing Address 2215 Fenton St   |  | Amount of Each Disbursement this Period<br>60.00  |
| City Richmond State VA Zip Code 23231  | Purpose of Disbursement<br>GOTV Worker<br>Candidate Name   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 240.00 |
| <b>TOTAL</b> 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 425 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BrendaHoward</b>  |  | <b>Transaction ID: D32308</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3905 Coral Maple Ct.   |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MarquiseBrowder</b>   |  | <b>Transaction ID: D31788</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 537 Cedar Rd.  |  | Amount of Each Disbursement this Period<br>120.00                       |  |
| City Chesapeake<br>State VA<br>Zip Code 23324  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ChaseMaher</b>  |  | <b>Transaction ID: D32468</b><br>Date of Disbursement<br>11 / 07 / 2006 |  |
| Mailing Address 3250 Sandpiper Rd  |  | Amount of Each Disbursement this Period<br>150.00                       |  |
| City Virginia Beach<br>State VA<br>Zip Code 23456  | Purpose of Disbursement<br>GOTV Worker   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 390.00      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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 426 / 742

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

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |  |   |  |   |
|--|--|---|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>RyanLee</p> <p>Mailing Address 50 Tupelo Cir</p> <p>City Hampton State VA Zip Code 23666</p> <p>Purpose of Disbursement GOTV Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>           |  | <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> |  | <p><b>Transaction ID:</b> D32427</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.00"/></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>BeverlyAnt</p> <p>Mailing Address 2322 Fairfield Ave.</p> <p>City Richmond State VA Zip Code 23223</p> <p>Purpose of Disbursement GOTV Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> |  | <p><b>Transaction ID:</b> D31802</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>  |

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |   |
|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Linemark Printing | Nature of Debt (Purpose):<br>Candidate Printing/Webb<br>VA Senate |
| Mailing Address 1220 Caraway Court<br>Suite 1040   |   |
| City State ZIP Code<br>Largo MD 20774  |   |

|   |                               |  |
|---|-------------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID: D32813</b> |  |
| Amount Incurred This Period<br>1267.76            | Payment This Period<br>0.00   | Outstanding Balance at Close of This Period<br>1267.76 |

|   |  |
|---|--|
| <b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>PROMOS | Nature of Debt (Purpose):<br>Paraphernalia |
| Mailing Address PO Box 13011  |  |
| City State ZIP Code<br>Norfolk VA 23506-0011                                      |  |

|   |                               |   |
|---|-------------------------------|---|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID: D32809</b> |   |
| Amount Incurred This Period<br>829.10             | Payment This Period<br>0.00   | Outstanding Balance at Close of This Period<br>829.10 |

|  |  |
|--|--|
| <b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Anthem Health Keepers | Nature of Debt (Purpose):<br>Employee Health Insurance |
| Mailing Address PO Box 17499   |  |
| City State ZIP Code<br>Baltimore MD 21297  |  |

|  |                               |  |
|--|-------------------------------|--|
| Outstanding Balance Beginning This Period<br>1736.10 | <b>Transaction ID: D30970</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00   | Outstanding Balance at Close of This Period<br>1736.10 |

|  |                |
|--|----------------|
| <b>1) SUBTOTALS</b> This Period This Page (optional).....                                      | <b>3832.96</b> |
| <b>2) TOTALS</b> This Period (last page this line number only).....                            |                |
| <b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....                       |                |
| <b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) |                |

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 428 / 742  |
|   | FOR LINE NUMBER:<br>(check only one) <input type="checkbox"/> 9<br><input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |   |
|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Democratic Party of Virginia Non-Feder | Nature of Debt (Purpose):<br>Debt for excessive contribution from AFT |
| Mailing Address PO Box 1057   |   |
| City State ZIP Code<br>Richmond VA 23218  |   |

|   |  |   |
|---|--|---|
| Outstanding Balance Beginning This Period<br><input type="text" value="5000.00"/> | <b>Transaction ID: D30980</b>                            |   |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                  | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="5000.00"/> |

|  |  |
|--|--|
| <b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Linemark Printing | Nature of Debt (Purpose):<br>Exempt Candidate Mail |
| Mailing Address 1220 Caraway Court<br>Suite 1040   |  |
| City State ZIP Code<br>Largo MD 20774  |  |

|  |  |  |
|--|--|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="0.00"/> | <b>Transaction ID: D32815</b>                            |  |
| Amount Incurred This Period<br><input type="text" value="10410.75"/>           | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="10410.75"/> |

|   |   |
|---|---|
| <b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Direct Line Politics | Nature of Debt (Purpose):<br>Fundraising Consulting |
| Mailing Address 107 Oronoco Street<br>Suite 100   |   |
| City State ZIP Code<br>Alexandria VA 22314  |   |

|  |  |   |
|--|--|---|
| Outstanding Balance Beginning This Period<br><input type="text" value="0.00"/> | <b>Transaction ID: D32811</b>                            |   |
| Amount Incurred This Period<br><input type="text" value="3233.38"/>            | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="3233.38"/> |

|  |                                       |
|--|---------------------------------------|
| <b>1) SUBTOTALS</b> This Period This Page (optional).....                                      | <input type="text" value="18644.13"/> |
| <b>2) TOTALS</b> This Period (last page this line number only).....                            | <input type="text"/>                  |
| <b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....                       | <input type="text"/>                  |
| <b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/>                  |

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |  |
|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Incredible Edibles | Nature of Debt (Purpose):<br>Food and Beverage |
| Mailing Address 1 N Belmont Ave   |  |
| City State ZIP Code<br>Richmond VA 23221-3003   |  |

|   |                               |  |
|---|-------------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID: D32808</b> |  |
| Amount Incurred This Period<br>2567.19            | Payment This Period<br>0.00   | Outstanding Balance at Close of This Period<br>2567.19 |

|   |   |
|---|---|
| <b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Voter Activation Network | Nature of Debt (Purpose):<br>Voter File Development |
| Mailing Address 54 Regemt St  |   |
| City State ZIP Code<br>Cambridge MA 02140   |   |

|   |                               |  |
|---|-------------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID: D32812</b> |  |
| Amount Incurred This Period<br>8000.00            | Payment This Period<br>0.00   | Outstanding Balance at Close of This Period<br>8000.00 |

|  |  |
|--|--|
| <b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Linemark Printing | Nature of Debt (Purpose):<br>Candidate Printing/Scott VA 6th |
| Mailing Address 1220 Caraway Court Suite 1040  |  |
| City State ZIP Code<br>Largo MD 20774  |  |

|   |                               |  |
|---|-------------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID: D32814</b> |  |
| Amount Incurred This Period<br>1267.75            | Payment This Period<br>0.00   | Outstanding Balance at Close of This Period<br>1267.75 |

|  |                 |
|--|-----------------|
| <b>1) SUBTOTALS</b> This Period This Page (optional).....                                      | <b>11834.94</b> |
| <b>2) TOTALS</b> This Period (last page this line number only).....                            |                 |
| <b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....                       |                 |
| <b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) |                 |

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 430 / 742  |
|   | FOR LINE NUMBER:<br>(check only one) <input type="checkbox"/> 9<br><input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |   |
|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Direct Line Politics | Nature of Debt (Purpose):<br>Fundraising Consulting |
| Mailing Address 107 Oronoco Street<br>Suite 100   |   |
| City State ZIP Code<br>Alexandria VA 22314  |   |

|   |                               |   |
|---|-------------------------------|---|
| Outstanding Balance Beginning This Period | <b>Transaction ID: D32810</b> |   |
| 0.00                                      |                               |   |
| Amount Incurred This Period               | Payment This Period           | Outstanding Balance at Close of This Period |
| 3656.89                                   | 0.00                          | 3656.89                                     |

|  |          |
|--|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional).....                                      | 3656.89  |
| 2) <b>TOTALS</b> This Period (last page this line number only).....                            | 37968.92 |
| 3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....                       |          |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) |          |

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cheryl Sparrow

---

Mailing Address  
3148 Fairview St  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31262

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tiera Glover

---

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31308

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Donna Houston

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23222 |
|------------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

Amount  
30.00

Transaction ID: D31064

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Gregory Davis

Mailing Address  
1712 Brookfield St  
Richmond, VA 23222

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23222 |
|------------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
35.00

Transaction ID: D31455

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | 65.00 |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| <b>(c) TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tisha Smith

---

Mailing Address  
1718 Hodges Ferry Rd  
Portsmouth, VA 23701-2113

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-2113 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
26.67

**Transaction ID:** D31124

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Terrell Debrew

---

Mailing Address  
544 22nd Street  
Apt C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5274 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31531

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 51.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

City State Zip Code  
Richmond VA 23231

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: D31088

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Beverly B. Davis

Mailing Address  
405 Russell Street  
Portsmouth, VA 23707

City State Zip Code  
Portsmouth VA 23707

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: D31249

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures .....

(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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tisha Smith

---

Mailing Address  
1718 Hodges Ferry Rd  
Portsmouth, VA 23701-2113

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-2113 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

**Transaction ID:** D31292

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Xavier Lewis

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31439

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rico Cunningham

---

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31399

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Aquanetta Scott

---

Mailing Address  
1528 Coalter St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31062

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Kevion Walston

---

Mailing Address  
801 Lassiter Drive  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31570

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Norma Robinson

---

Mailing Address  
1528 Coalter St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31082

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tyshon Lewis

---

Mailing Address  
544 22nd Street  
Apt C

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

**Transaction ID:** D31516

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Shanese Dickey

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
23.34

**Transaction ID:** D31366

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 48.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Ramon Clyburn

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
531 19th St  
Apt B

Amount  
16.66

City State Zip Code  
Newport News VA 23607

Transaction ID: D31417  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Marquita McConico

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
228 Chowas Trace  
Portsmouth, VA 23701

Amount  
16.67

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31347  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 33.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Janice Moody

---

Mailing Address  
105 St George Way  
Hampton, VA 23661

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23661 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31401

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Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Patrick Lewis

---

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31086

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Marquita McConico

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

Mailing Address  
228 Chowas Trace  
Portsmouth, VA 23701

Amount  
20.00

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31256

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Maurice Roberson

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2521 Bethel St  
Richmond, VA 23223

Amount  
25.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31492

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Linda Patillo

---

Mailing Address  
1509 Ellington Sq  
Portsmouth, VA 23701

---

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Portsmouth | VA    | 23701    |

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31334

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Leslie Cox

---

Mailing Address  
1341 Mt. Vernon Ave  
Portsmouth, VA 23707

---

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Portsmouth | VA    | 23707    |

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31241

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Xavier Lewis

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

Mailing Address  
544 22nd St  
APT C

Amount  
20.00

City State Zip Code  
Newport News VA 23607-4541

Transaction ID: D31143  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Sarah Motley

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
120 W Pembroke Ave  
Hampton, VA 23669

Amount  
16.67

City State Zip Code  
Hampton VA 23669

Transaction ID: D31394  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 36.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

---

Mailing Address  
1332 Tree Ridge Rd  
Richmond, VA 23231-6880

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231-6880 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31067

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Montae Harris

---

Mailing Address  
637 Milford Ave  
Hampton, VA 23661

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23661 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31478

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sineeta Flamer

Mailing Address  
1706 Terminal Ave  
Newport News, VA 23607

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount

Transaction ID: D31560

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Bernard Robinson

Mailing Address  
1130 37th St  
Newport News, VA 23607

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount

Transaction ID: D31546

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |  |
|---|--|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <input style="width:100px" type="text" value="60.00"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <input style="width:100px" type="text" value="0.00"/>  |
| (c) TOTAL Independent Expenditures .....                  | <input style="width:100px" 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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
11 / 05 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2107 Jefferson Ave  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31542  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jerard Elliott

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

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
20.00

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31196  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Antoinette Harris

---

Mailing Address  
3017 Williams Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31479

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jalisa Keeling

---

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-2116 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31236

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jamar Harris

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1354 29th Street  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31472  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Monchelle Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
APT A

Amount  
16.67

City State Zip Code  
Newport News VA 23607-5290

Transaction ID: D31422  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 41.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Xavier Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 22nd St  
APT C

Amount  
16.67

City State Zip Code  
Newport News VA 23607-4541

Transaction ID: D31440  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Full Name (Last, First, Middle, Initial) of Payee  
Nicole Elliott

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

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
26.66

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31176  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Xavier Lewis

Mailing Address  
544 22nd St  
APT C

City State Zip Code  
Newport News VA 23607-4541

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

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

Amount  
20.00

Transaction ID: D31145

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sherman Cotman

Mailing Address  
2221 Fairfield Ave  
Richmond, VA 23223

City State Zip Code  
Richmond VA 23223

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

Transaction ID: D31490

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jasmine Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31313

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jazmine Williams

---

Mailing Address  
106 Whilbrel Drive  
Suffolk, VA 23435

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Suffolk | State<br>VA | Zip Code<br>23435 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31513

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Walteria Williford

---

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23222 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

Transaction ID: D31104

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Shanese Dickey

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

Transaction ID: D31364

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 53.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Angela Harris

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
3011 Williams St  
Newport News, VA 23607-3731

Amount  
35.00

City State Zip Code  
Newport News VA 23607-3731

Transaction ID: D31530  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Starneka Taylor

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

Amount  
25.00

City State Zip Code  
Richmond VA 23231

Transaction ID: D31460  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 60.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

---

Mailing Address  
1220 Caraway Court  
Suite 1040

---

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Largo | State<br>MD | Zip Code<br>20774 |
|---------------|-------------|-------------------|

---

|   |                   |
|---|-------------------|
| Purpose of Expenditure<br>Grassroots Campaign Materials | Category/<br>Type |
|---|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
783.06

**Transaction ID:** D31047

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Xavier Lewis

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31146

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |        |
|--|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 803.06 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00   |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Chanda Jackson

---

Mailing Address  
813 23rd Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31482

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jasmine Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31314

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Raylene Browder

Mailing Address  
537 Cedar Raod  
Chesapeake, VA 23321

City State Zip Code  
Chesapeake VA 23321

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

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

Amount  
20.00

Transaction ID: D31142

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sterling Lyons

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

City State Zip Code  
Norfolk VA 23523

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

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

Amount  
20.00

Transaction ID: D31269

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sharonda Drew

Mailing Address  
1555 Ave  
Newport News, VA 23607

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount

Transaction ID: D31574

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Shawntia Lewis

Mailing Address  
545 A 21st Street  
Newport News, VA 23607

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount

Transaction ID: D31515

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |                                    |
|--|------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <input type="text" value="50.00"/> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Kshara Jarman

---

Mailing Address  
132 Garrett Drive  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

**Transaction ID:** D31537

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jolyn Lewis

---

Mailing Address  
545 21st St  
Apt A

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

**Transaction ID:** D31425

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

---

Mailing Address  
1332 Tree Ridge Rd  
Richmond, VA 23231-6880

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231-6880 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
35.00

**Transaction ID:** D31467

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Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Stewart Adams

---

Mailing Address  
2726 High St  
Portsmouth, VA 23707-3522

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23707-3522 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.34

**Transaction ID:** D31324

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 58.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Brandon Poulson

---

Mailing Address  
50 Tueplo Circle  
Hampton, VA 23666-4842

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23666-4842 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31477

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Timothy Washington

---

Mailing Address  
639 50th Street  
Newport News, VA 23605

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23605 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31538

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jerard Elliott

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

City State Zip Code  
Chesapeake VA 23321-4911

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

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

Amount  
20.00

Transaction ID: D31192

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Roderyck Bullock

Mailing Address  
1604 N 28th St  
Richmond, VA 23223-5316

City State Zip Code  
Richmond VA 23223-5316

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

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

Amount  
30.00

Transaction ID: D31092

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |   |
|--|---|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">50.00</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) <b>TOTAL</b> Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Justin Elliott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
16.67

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31317

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Takeia Gibbs

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

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

Amount  
20.00

City State Zip Code  
Norfolk VA 23502-2116

Transaction ID: D31216

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Kevin Battle

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

Amount  
25.00

City State Zip Code  
Richmond VA 23231

**Transaction ID:** D31458  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Lavelle Clyburn

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
531 19th St  
Apt B

Amount  
16.67

City State Zip Code  
Newport News VA 23607

**Transaction ID:** D31412  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|  |              |
|--|--------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>41.67</b> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| <b>(c) TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Royaleene Best

---

Mailing Address  
1513 Ivy Ave  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|       |
|-------|
| 30.00 |
|-------|

**Transaction ID:** D31559

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Donna Houston

---

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23222 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|       |
|-------|
| 30.00 |
|-------|

**Transaction ID:** D31065

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 60.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date 

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sonya Lewis

---

Mailing Address  
103 Navajo Trl  
Portsmouth, VA 23701-2429

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-2429 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.34

**Transaction ID:** D31330

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Derrick Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31166

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Annette Bullock

Mailing Address  
1823 N 29th St  
Richmond, VA 23223

City State Zip Code  
Richmond VA 23223

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

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

Amount  
30.00

Transaction ID: D31059

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

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

Mailing Address  
5709 Surry Ave  
Newport News, VA 23605

City State Zip Code  
Newport News VA 23605

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

Transaction ID: D31493

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |   |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">55.00</span> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) TOTAL Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sarah Motley

---

Mailing Address  
120 W Pembroke Ave  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31396

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sandre Lewis

---

Mailing Address  
544 22nd Street  
Apt C

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
40.00

**Transaction ID:** D31509

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 56.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

Amount  
25.00

City State Zip Code  
Richmond VA 23231

Transaction ID: D31469

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jolyn Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
APT A

Amount  
25.00

City State Zip Code  
Newport News VA 23607-5290

Transaction ID: D31524

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

---

Mailing Address  
4706 Masondale Dr  
Richmond, VA 23234

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23234 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
10.00

**Transaction ID:** D31121

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Xavier Lewis

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31506

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 35.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Kima Pretlow

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
78 Williams Ln  
Williamsburg, VA 23888

Amount  
16.67

City State Zip Code  
Williamsburg VA 23888

Transaction ID: D31382

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1410 35th St  
Newport News, VA 23607

Amount  
35.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31528

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 51.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Brenda Patillo

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
506 Roosevelt Blvd.  
Portsmouth, VA 23701

Amount  
16.67

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31353  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 2732.98

Full Name (Last, First, Middle, Initial) of Payee  
Najeania Cannon

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

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

Amount  
30.00

City State Zip Code  
Richmond VA 23231

Transaction ID: D31079  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 46.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Kevin Battle

---

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31072

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Anaya Blair

---

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
26.67

**Transaction ID:** D31237

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 56.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jolyn Lewis

---

Mailing Address  
545 21st St  
Apt A

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31426

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Thaddeus Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31442

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lamar Harris

---

Mailing Address  
1354 36th Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

Transaction ID: D31473

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lionel Brookins

---

Mailing Address  
301 Bertwick Ln  
Chesapeake, VA 23325

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23325 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.66

Transaction ID: D31378

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 41.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Wesley Smith

---

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31106

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Cecelia Cunningham

---

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31233

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jolyn Lewis

Mailing Address  
545 21st St  
Apt A

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: D31168

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Brenda Patillo

Mailing Address  
506 Roosevelt Blvd.  
Portsmouth, VA 23701

City State Zip Code  
Portsmouth VA 23701

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: D31279

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |                                    |
|---|------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <input type="text" value="40.00"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rashard Lewis

Date  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 0 | 6 |

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31529

Purpose of Expenditure  
GOTV Worker

Category/Type

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Patrick Lewis

Date  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 0 | 6 |

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

Amount  
25.00

City State Zip Code  
Richmond VA 23231

Transaction ID: D31471

Purpose of Expenditure  
GOTV Worker

Category/Type

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 0 | 6 |

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Beverly B. Davis

---

Mailing Address  
405 Russell Street  
Portsmouth, VA 23707

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23707 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

**Transaction ID:** D31344

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Xavier Lewis

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.66

**Transaction ID:** D31441

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Hunter Marvin

---

Mailing Address  
535 22nd Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31580

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Monchelle Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31543

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Antonio Patillo

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

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

Amount  
20.00

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31285  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Anika Blair

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2917 Ryland Rd  
Hampton, VA 23661

Amount  
16.66

City State Zip Code  
Hampton VA 23661

Transaction ID: D31369  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 36.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tisha Smith

---

Mailing Address  
1718 Hodges Ferry Rd  
Portsmouth, VA 23701-2113

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-2113 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

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

---

Amount  
26.66

**Transaction ID:** D31122

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Paris Hudson

---

Mailing Address  
801 Lassiter Dr  
Newport News, VA 23607

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|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31550

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 56.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Brenda Patillo

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

Mailing Address  
506 Roosevelt Blvd.  
Portsmouth, VA 23701

Amount  
20.00

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31281

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Derek Hyman

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1333 28th St  
Newport News, VA 23607

Amount  
40.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31510

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 60.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jasmine Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

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|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31181

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

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

---

Mailing Address  
4706 Masondale Dr  
Richmond, VA 23234

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23234 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
10.00

**Transaction ID:** D31120

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 30.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Mailing Address  
1332 Tree Ridge Rd  
Richmond, VA 23231-6880

City Richmond State VA Zip Code 23231-6880

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  /  /

Amount 30.00

Transaction ID: D31066

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Anika Blair

Mailing Address  
2917 Ryland Rd  
Hampton, VA 23661

City Hampton State VA Zip Code 23661

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  /  /

Amount 16.67

Transaction ID: D31367

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 46.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  /  /

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Derrick Lewis

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

Mailing Address  
545 21st St  
APT A

Amount  
20.00

City State Zip Code  
Newport News VA 23607-5290

Transaction ID: D31164

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jerard Elliott

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

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
20.00

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31197

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 40.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Terrell Debrew

---

Mailing Address  
544 22nd Street  
Apt C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5274 |
|----------------------|-------------|------------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31434

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sandra DeBrew

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31134

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tyrhen Williams

---

Mailing Address  
106 Whimbrel Drive  
Suffolk, VA 23435

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Suffolk | State<br>VA | Zip Code<br>23435 |
|-----------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

**Transaction ID:** D31511

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lemonte Lewis

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

**Transaction ID:** D31452

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Aquanetta Scott

---

Mailing Address  
1528 Coalter St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31501

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Racqueleona Clyburn

---

Mailing Address  
531 19th Street  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31410

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Orlando Lewis

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607-5643

City State Zip Code  
Newport News VA 23607-5643

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
16.67

Transaction ID: D31449

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jocie Jarman

Mailing Address  
132 Garrett  
Hampton, VA 23666

City State Zip Code  
Hampton VA 23666

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
40.00

Transaction ID: D31505

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |              |
|--|--------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>56.67</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
11 / 05 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rico Cunningham

---

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31398

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Levi Bradley

---

Mailing Address  
2221 Fairfield Ave  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31494

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Inez Smith

---

Mailing Address  
1002 Home Ave  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31204

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sonya Lewis

---

Mailing Address  
103 Navajo Trl  
Portsmouth, VA 23701-2429

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-2429 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
26.67

**Transaction ID:** D31210

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sandra DeBrew

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 22nd St  
APT C

Amount  
16.67

City State Zip Code  
Newport News VA 23607-4541

Transaction ID: D31446  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Full Name (Last, First, Middle, Initial) of Payee  
Sonya Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
103 Navajo Trl  
Portsmouth, VA 23701-2429

Amount  
23.33

City State Zip Code  
Portsmouth VA 23701-2429

Transaction ID: D31328  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Thaddeus Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
APT A

Amount  
16.66

City State Zip Code  
Newport News VA 23607-5290

Transaction ID: D31444  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Inez Smith

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

Mailing Address  
1002 Home Ave  
Portsmouth, VA 23701

Amount  
20.00

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31206  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 36.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1027 23rd St  
Newport News, VA 23607-4703

Amount  
30.00

City State Zip Code  
Newport News VA 23607-4703

Transaction ID: D31556

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jasmin Coleman

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
808 Bold Street  
Portsmouth, VA 23701

Amount  
16.67

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31326

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 46.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Beverly B. Davis

---

Mailing Address  
405 Russell Street  
Portsmouth, VA 23707

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23707 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

Transaction ID: D31250

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Justin Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

Transaction ID: D31318

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 36.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jalisa Keeling

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

City Norfolk State VA Zip Code 23502-2116

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date 11 / 05 / 2006

Amount 16.67  
Transaction ID: D31338

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Rene Lyons

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

City Norfolk State VA Zip Code 23523

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date 10 / 29 / 2006

Amount 26.67  
Transaction ID: D31284

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 43.34 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 11 / 05 / 2006

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Janice Luter

Mailing Address  
717 20th Street  
Newport News, VA 23607-5284

City State Zip Code  
Newport News VA 23607-5284

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
25.00

**Transaction ID:** D31502

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tenille Clyburn

Mailing Address  
531 19th St  
Newport News, VA 23607-5284

City State Zip Code  
Newport News VA 23607-5284

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
40.00

**Transaction ID:** D31512

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |   |
|--|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <span style="border: 1px solid black; padding: 2px;">65.00</span> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <span style="border: 1px solid black; padding: 2px;">0.00</span>  |
| <b>(c) TOTAL</b> Independent Expenditures .....                  | <span style="border: 1px solid black; padding: 2px;"> </span>     |

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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
11 / 05 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Takeia Gibbs

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

City Norfolk State VA Zip Code 23502-2116

Purpose of Expenditure  
GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought

Date

Amount

Transaction ID: D31332

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lemonte Lewis

Mailing Address  
544 22nd St  
APT C

City Newport News State VA Zip Code 23607-4541

Purpose of Expenditure  
GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought

Date

Amount

Transaction ID: D31127

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |                                    |
|---|------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <input type="text" value="36.67"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (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.

Abbi Easter  
Signature

Date

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

---

Mailing Address  
4706 Masondale Dr  
Richmond, VA 23234

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23234 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
35.00

**Transaction ID:** D31483

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Antonio Patillo

---

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31286

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Walter Robinson

---

Mailing Address  
104 Glinhurst Rd  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31102

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Derrick Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31428

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

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

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  
20.00

**Transaction ID:** D31157

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

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

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  
20.00

**Transaction ID:** D31158

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |              |
|--|--------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>40.00</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date 

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lemonte Lewis

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31126

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sterling Lyons

---

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31371

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Kima Pretlow

---

Mailing Address  
78 Williams Ln  
Williamsburg, VA 23888

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Williamsburg | State<br>VA | Zip Code<br>23888 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31248

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Monchelle Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31173

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

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

---

Mailing Address  
545 21st St  
Newport News, VA 23607-5290

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

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

Amount  
26.67

**Transaction ID:** D31179

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

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

---

Mailing Address  
1220 Caraway Court  
Suite 1040

---

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Largo | State<br>MD | Zip Code<br>20774 |
|---------------|-------------|-------------------|

---

|  |                   |
|--|-------------------|
| Purpose of Expenditure<br>Grassroots Campaign<br>Materials | Category/<br>Type |
|--|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 1 |   | 0 5 |   | 2 0 0 6 |

Amount  
279.67

**Transaction ID:** D31291

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |               |
|--|---------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>306.34</b> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>   |
| <b>(c) TOTAL</b> 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.

Abbi Easter  
Signature

Date 

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cardel Patillo

---

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
26.67

**Transaction ID:** D31274

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lemonte Lewis

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31128

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jasmin Coleman

---

Mailing Address  
808 Bold Street  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31207

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Otis Dowtin

---

Mailing Address  
1718 Hodges Ferry Road  
Portsmouth, VA 23701-3848

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-3848 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31133

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Williemae Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 A 21st Street  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31536  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Linda Patillo

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1509 Ellington Sq  
Portsmouth, VA 23701

Amount  
16.67

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31335  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 41.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Anaya Blair

---

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
26.66

**Transaction ID:** D31239

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Cecelia Cunningham

---

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31392

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Ramon Clyburn

---

Mailing Address  
531 19th St  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31416

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sterling Lyons

---

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31370

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Moses Sykes

---

Mailing Address  
670 Aquavista Dr  
Apt D

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|       |
|-------|
| 40.00 |
|-------|

**Transaction ID:** D31525

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lavelle Clyburn

---

Mailing Address  
531 19th St  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|       |
|-------|
| 16.66 |
|-------|

**Transaction ID:** D31414

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |   |       |
|--|---|-------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; text-align: right; padding: 2px;">56.66</td> </tr> </table> | 56.66 |
| 56.66  |   |       |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; text-align: right; padding: 2px;">0.00</td> </tr> </table>  | 0.00  |
| 0.00   |   |       |
| <b>(c) TOTAL</b> Independent Expenditures .....                  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; height: 20px;"></td> </tr> </table>                         |       |
|  |   |       |

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.

Abbi Easter  
 \_\_\_\_\_  
 Signature

Date 

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cheryl Sparrow

---

Mailing Address  
3148 Fairview St  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31263

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Gelisa Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31547

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Roderyck Bullock

---

Mailing Address  
1604 N 28th St  
Richmond, VA 23223-5316

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223-5316 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
10.00

Transaction ID: D31116

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Kima Pretlow

---

Mailing Address  
78 Williams Ln  
Williamsburg, VA 23888

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Williamsburg | State<br>VA | Zip Code<br>23888 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

Transaction ID: D31247

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 30.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Curtis Berry

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

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

Amount  
20.00

City State Zip Code  
Hampton VA 23669

Transaction ID: D31245  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Giovanni Williford

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

Amount  
25.00

City State Zip Code  
Richmond VA 23222

Transaction ID: D31497  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jasmine Elliott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
16.66

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31315

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Stewart Adams

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

Mailing Address  
2726 High St  
Portsmouth, VA 23707-3522

Amount  
26.67

City State Zip Code  
Portsmouth VA 23707-3522

Transaction ID: D31201

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 43.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lisa West

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

Amount  
23.33

City State Zip Code  
Norfolk VA 23502

Transaction ID: D31301  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Alicia Castro

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

Mailing Address  
2516 Bethel St  
Richmond, VA 23223-3644

Amount  
10.00

City State Zip Code  
Richmond VA 23223-3644

Transaction ID: D31111  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 33.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Brandi Duck

---

Mailing Address  
530 G 19th Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31573

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Roderyck Bullock

---

Mailing Address  
1604 N 28th St  
Richmond, VA 23223-5316

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223-5316 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31093

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Ramon Clyburn

---

Mailing Address  
531 19th St  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31195

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Twanika Duck

---

Mailing Address  
1014 35th St  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31582

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Brenda Patillo

---

Mailing Address  
506 Roosevelt Blvd.  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31352

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Anaya Blair

---

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

**Transaction ID:** D31390

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tameka Walker

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 Adams Dr  
Newport News, VA 23601-2812

Amount  
25.00

Transaction ID: D31572

City State Zip Code  
Newport News VA 23601-2812

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Sandre Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 22nd Street  
Apt C

Amount  
23.33

Transaction ID: D31430

City State Zip Code  
Newport News VA 23607

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 48.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

Amount  
16.67

City State Zip Code  
Norfolk VA 23502

Transaction ID: D31305

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jerard Elliott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
16.66

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31321

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 33.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
Newport News, VA 23607-5290

Amount  
23.33

City State Zip Code  
Newport News VA 23607-5290

Transaction ID: D31418  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Annie Giles

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

Mailing Address  
2516 Bethel St  
Richmond, VA 23223-3644

Amount  
30.00

City State Zip Code  
Richmond VA 23223-3644

Transaction ID: D31061  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 53.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Alicia Castro

---

Mailing Address  
2516 Bethel St  
Richmond, VA 23223-3644

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223-3644 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
35.00

**Transaction ID:** D31486

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Kelly Duck

---

Mailing Address  
801 Lassiter Drive  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31569

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 60.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Wilbert Sanders

Mailing Address  
544 14th St  
Newport News, VA 23607

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
30.00

Transaction ID: D31548

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Bilal Muhammad

Mailing Address  
2101 Jefferson Ave  
Newport News, VA 23607

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

Transaction ID: D31544

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |   |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">55.00</span> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) TOTAL Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sterling Lyons

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

City Norfolk State VA Zip Code 23523

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date 10 / 29 / 2006

Amount 20.00

Transaction ID: D31268

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Tammy Jenkins

Mailing Address  
1332 Tree Ridge Road  
Richmond, VA 23231

City Richmond State VA Zip Code 23231

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date 10 / 29 / 2006

Amount 30.00

Transaction ID: D31100

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 10 / 29 / 2006

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Tammy Jenkins

---

Mailing Address  
1332 Tree Ridge Road  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|  |       |
|--|-------|
|  | 25.00 |
|--|-------|

**Transaction ID:** D31468

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Giovanni Williford

---

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23222 |
|------------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|  |       |
|--|-------|
|  | 30.00 |
|--|-------|

**Transaction ID:** D31070

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date 

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Andrea Bullock

---

Mailing Address  
1823 N 29th St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

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

Amount  

|       |
|-------|
| 30.00 |
|-------|

**Transaction ID:** D31056

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Thaddeus Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

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Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  

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

Amount  

|       |
|-------|
| 20.00 |
|-------|

**Transaction ID:** D31138

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date 

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Derrick Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
APT A

Amount  
16.67

City State Zip Code  
Newport News VA 23607-5290

**Transaction ID:** D31427  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Tiera Glover

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

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

Amount  
20.00

City State Zip Code  
Norfolk VA 23502

**Transaction ID:** D31165  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|  |              |
|--|--------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>36.67</b> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| <b>(c) TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

---

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31306

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Starneka Taylor

---

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

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Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31099

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Starneka Taylor

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

City Richmond State VA Zip Code 23231

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date 10 / 29 / 2006

Amount 30.00

Transaction ID: D31098

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Orlando Lewis

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607-5643

City Newport News State VA Zip Code 23607-5643

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date 10 / 29 / 2006

Amount 20.00

Transaction ID: D31131

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 10 / 29 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Curtis Berry

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

Amount  
16.67

City State Zip Code  
Hampton VA 23669

Transaction ID: D31385  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
George Johnson

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
532 N 21st St  
Richmond, VA 23223-7202

Amount  
25.00

City State Zip Code  
Richmond VA 23223-7202

Transaction ID: D31488  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 41.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Linda Patillo

---

Mailing Address  
1509 Ellington Sq  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31229

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Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Andrea Bullock

---

Mailing Address  
1823 N 29th St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31057

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Timothy Duck

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1014 35th St  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31581  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Nicole Elliott

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

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
26.67

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31171  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 51.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
El Williams

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
106 Whimbrel Drive  
Suffolk, VA 23435

Amount  
25.00

City State Zip Code  
Suffolk VA 23435

Transaction ID: D31508

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2256 Jefferson Ave  
Newport News, VA 23607

Amount  
30.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31564

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 55.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Thaddeus Lewis

Mailing Address  
545 21st St  
APT A

City State Zip Code  
Newport News VA 23607-5290

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31443

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Donna Houston

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

City State Zip Code  
Richmond VA 23222

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

Transaction ID: D31498

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |   |
|--|---|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <span style="border: 1px solid black; padding: 2px;">41.67</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <span style="border: 1px solid black; padding: 2px;">0.00</span>  |
| (c) <b>TOTAL</b> Independent Expenditures .....                  | <span style="border: 1px solid black; padding: 2px;"> </span>     |

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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Raylene Browder

Mailing Address  
537 Cedar Raod  
Chesapeake, VA 23321

City State Zip Code  
Chesapeake VA 23321

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount

Transaction ID: D31298

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lewis Raguan

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount

Transaction ID: D31541

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |                                    |
|--|------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <input type="text" value="41.66"/> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
11 / 05 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Levi Bradley

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

Mailing Address  
2221 Fairfield Ave  
Richmond, VA 23223

Amount  
30.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31075  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Leslie Cox

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1341 Mt. Vernon Ave  
Portsmouth, VA 23707

Amount  
16.67

City State Zip Code  
Portsmouth VA 23707

Transaction ID: D31340  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 46.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Terrell Debrew

Mailing Address  
544 22nd Street  
Apt C

City State Zip Code  
Newport News VA 23607-5274

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

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

Amount  
20.00

**Transaction ID:** D31156

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tyshon Lewis

Mailing Address  
544 22nd Street  
Apt C

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

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

Amount  
20.00

**Transaction ID:** D31147

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |   |
|--|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <span style="border: 1px solid black; padding: 2px;">40.00</span> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <span style="border: 1px solid black; padding: 2px;">0.00</span>  |
| <b>(c) TOTAL</b> Independent Expenditures .....                  | <span style="border: 1px solid black; padding: 2px;"> </span>     |

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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Gregory Davis

---

Mailing Address  
1712 Brookfield St  
Richmond, VA 23222

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23222 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31050

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tiera Glover

---

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31163

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Nicole Elliott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
23.33

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31311  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

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

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

Mailing Address  
1220 Caraway Court  
Suite 1040

Amount  
783.06

City State Zip Code  
Largo MD 20774

Transaction ID: D31049  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
Grassroots Campaign Materials

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|   |        |
|---|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 806.39 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00   |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Marquita McConico

---

Mailing Address  
228 Chowas Trace  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|  |       |
|--|-------|
|  | 16.67 |
|--|-------|

**Transaction ID:** D31346

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

|  |         |
|--|---------|
|  | 8117.26 |
|--|---------|

Full Name (Last, First, Middle, Initial) of Payee  
Ramon Clyburn

---

Mailing Address  
531 19th St  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|  |       |
|--|-------|
|  | 20.00 |
|--|-------|

**Transaction ID:** D31194

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

|  |         |
|--|---------|
|  | 2732.98 |
|--|---------|

|  |  |  |       |
|--|--|--|-------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">36.67</td> </tr> </table> |  | 36.67 |
|  | 36.67  |  |       |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">0.00</td> </tr> </table>  |  | 0.00  |
|  | 0.00   |  |       |
| <b>(c) TOTAL</b> Independent Expenditures .....                  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%;"></td> </tr> </table>                         |  |       |
|  |  |  |       |

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.

Abbi Easter  
Signature

Date 

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cheryl Sparrow

Mailing Address  
3148 Fairview St  
Norfolk, VA 23523

City Norfolk State VA Zip Code 23523

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date 11 / 05 / 2006

Amount 16.67

Transaction ID: D31373

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Derrick Lewis

Mailing Address  
545 21st St  
APT A

City Newport News State VA Zip Code 23607-5290

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date 10 / 29 / 2006

Amount 20.00

Transaction ID: D31162

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 36.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 11 / 05 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Curtis Berry

---

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31386

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Anaya Blair

---

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

**Transaction ID:** D31389

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Marquita McConico

---

Mailing Address  
228 Chowas Trace  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

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

Amount  
20.00

Transaction ID: D31259

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Jolyn Lewis

---

Mailing Address  
545 21st St  
Apt A

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

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

Amount  
20.00

Transaction ID: D31169

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

2732.98

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Breanna Futrell

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
50 Tueplo Circle  
Hampton, VA 23666

Amount  
25.00

City State Zip Code  
Hampton VA 23666

Transaction ID: D31476  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Leslie Cox

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

Mailing Address  
1341 Mt. Vernon Ave  
Portsmouth, VA 23707

Amount  
20.00

City State Zip Code  
Portsmouth VA 23707

Transaction ID: D31240  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Wesley Smith

---

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31107

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Cheryl Sparrow

---

Mailing Address  
3148 Fairview St  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31374

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Raylene Browder

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
537 Cedar Raod  
Chesapeake, VA 23321

Amount  
16.67

City State Zip Code  
Chesapeake VA 23321

**Transaction ID:** D31299  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Full Name (Last, First, Middle, Initial) of Payee  
Beverly B. Davis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
405 Russell Street  
Portsmouth, VA 23707

Amount  
16.66

City State Zip Code  
Portsmouth VA 23707

**Transaction ID:** D31345  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rasheta Johnson

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
549 21st St  
APT F

Amount  
25.00

City State Zip Code  
Newport News VA 23607-5260

**Transaction ID:** D31578  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Jolyn Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
Apt A

Amount  
16.67

City State Zip Code  
Newport News VA 23607

**Transaction ID:** D31424  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Nia Hutchinson

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31381

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Brenda Patillo

---

Mailing Address  
506 Roosevelt Blvd.  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31354

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.32 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jasmin Coleman

---

Mailing Address  
808 Bold Street  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31208

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Byron Levisy

---

Mailing Address  
5709 Surry Ave  
Newport News, VA 23605

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23605 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31489

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Pernell Knight

---

Mailing Address  
624 44th Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31496

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Inez Smith

---

Mailing Address  
1002 Home Ave  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31404

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

2732.98

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Stewart Adams

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2726 High St  
Portsmouth, VA 23707-3522

Amount  
23.33

City State Zip Code  
Portsmouth VA 23707-3522

Transaction ID: D31322  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Norma Robinson

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1528 Coalter St  
Richmond, VA 23223

Amount  
25.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31500  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 48.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
Newport News, VA 23607-5290

Amount  
23.34

City State Zip Code  
Newport News VA 23607-5290

Transaction ID: D31420  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Stewart Adams

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

Mailing Address  
2726 High St  
Portsmouth, VA 23707-3522

Amount  
26.66

City State Zip Code  
Portsmouth VA 23707-3522

Transaction ID: D31203  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Gregory Baker

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
4307 Roanoke Ave  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31534

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tenille Clyburn

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
531 19th St  
Newport News, VA 23607-5284

Amount  
23.33

City State Zip Code  
Newport News VA 23607-5284

Transaction ID: D31406

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 48.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Nicole Elliott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
23.34

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31310  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Sherman Cotman

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

Mailing Address  
2221 Fairfield Ave  
Richmond, VA 23223

Amount  
30.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31096  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 53.34 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Takeia Gibbs

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

City Norfolk State VA Zip Code 23502-2116

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date 10 / 29 / 2006

Amount 20.00  
Transaction ID: D31218

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Wesley Smith

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

City Richmond State VA Zip Code 23231

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date 11 / 05 / 2006

Amount 25.00  
Transaction ID: D31459

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 10 / 29 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lisa West

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

Amount  
26.66

Transaction ID: D31148

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Thaddeus Lewis

Mailing Address  
545 21st St  
APT A

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

Amount  
20.00

Transaction ID: D31139

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 46.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

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

Mailing Address  
4706 Masondale Dr  
Richmond, VA 23234

Amount  
30.00

City State Zip Code  
Richmond VA 23234

Transaction ID: D31109  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Kevin Battle

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

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

Amount  
30.00

City State Zip Code  
Richmond VA 23231

Transaction ID: D31073  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 60.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Gregory Davis

Mailing Address  
1712 Brookfield St  
Richmond, VA 23222

City State Zip Code  
Richmond VA 23222

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 29 / 2006

Amount

Transaction ID: D31114

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Kima Pretlow

Mailing Address  
78 Williams Ln  
Williamsburg, VA 23888

City State Zip Code  
Williamsburg VA 23888

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount

Transaction ID: D31384

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |                                    |
|---|------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <input type="text" value="26.66"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
10 / 29 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Anika Blair

---

Mailing Address  
2917 Ryland Rd  
Hampton, VA 23661

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23661 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

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

---

Amount  
20.00

**Transaction ID:** D31273

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Monchelle Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31423

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

4162.63

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Bernetta Walker

Mailing Address  
3000 Belleharbour Circle  
Apt 108

City State Zip Code  
Suffolk VA 23435

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.66

Transaction ID: D31351

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lionel Brookins

Mailing Address  
301 Bertwick Ln  
Chesapeake, VA 23325

City State Zip Code  
Chesapeake VA 23325

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31376

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |   |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">33.33</span> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) TOTAL Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

Date M M D D Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Monchelle Lewis

Mailing Address  
545 21st St  
APT A

City State Zip Code  
Newport News VA 23607-5290

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
16.67

Transaction ID: D31421

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tyshon Lewis

Mailing Address  
544 22nd Street  
Apt C

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
16.66

Transaction ID: D31438

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |              |
|--|--------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>33.33</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
11 / 05 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cecelia Cunningham

---

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

---

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Hampton | VA    | 23669    |

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

**Transaction ID:** D31391

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

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

---

Mailing Address  
1332 Tree Ridge Rd  
Richmond, VA 23231-6880

---

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Richmond | VA    | 23231-6880 |

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

Amount  
10.00

**Transaction ID:** D31113

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 26.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sandra DeBrew

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31135

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Racqueleona Clyburn

---

Mailing Address  
531 19th Street  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31411

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Mailing Address  
1332 Tree Ridge Rd  
Richmond, VA 23231-6880

City State Zip Code  
Richmond VA 23231-6880

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

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

Amount  
10.00

Transaction ID: D31112

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Rha'shawn Cotton

Mailing Address  
655 43rd Street  
Newport News, VA 23607

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

Transaction ID: D31554

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 35.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Marquita McConico

---

Mailing Address  
228 Chowas Trace  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31255

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Alicia Castro

---

Mailing Address  
2516 Bethel St  
Richmond, VA 23223-3644

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223-3644 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
10.00

**Transaction ID:** D31110

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 30.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Tyshon Lewis

---

Mailing Address  
544 22nd Street  
Apt C

---

|                                       |             |                   |
|---------------------------------------|-------------|-------------------|
| City<br>Newport News                  | State<br>VA | Zip Code<br>23607 |
| Purpose of Expenditure<br>GOTV Worker |             | Category/<br>Type |

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 1 |   | 0 5 |   | 2 0 0 6 |

Amount  

|       |
|-------|
| 16.67 |
|-------|

**Transaction ID:** D31436

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sarah Motley

---

Mailing Address  
120 W Pembroke Ave  
Hampton, VA 23669

---

|                                       |             |                   |
|---------------------------------------|-------------|-------------------|
| City<br>Hampton                       | State<br>VA | Zip Code<br>23669 |
| Purpose of Expenditure<br>GOTV Worker |             | Category/<br>Type |

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

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

Amount  

|       |
|-------|
| 20.00 |
|-------|

**Transaction ID:** D31227

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |  |       |
|--|--|-------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">36.67</td> </tr> </table> | 36.67 |
| 36.67  |  |       |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">0.00</td> </tr> </table>  | 0.00  |
| 0.00   |  |       |
| <b>(c) TOTAL</b> Independent Expenditures .....                  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; height: 20px;"></td> </tr> </table>      |       |
|  |  |       |

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.

Abbi Easter  
Signature

Date 

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 1 |   | 0 5 |   | 2 0 0 6 |

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1604 N 28th St  
Richmond, VA 23223

Amount  
25.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31463  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Cardel Patillo

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

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

Amount  
26.66

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31275  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 51.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Leslie Cox

---

Mailing Address  
1341 Mt. Vernon Ave  
Portsmouth, VA 23707

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23707 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31341

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Bernetta Walker

---

Mailing Address  
3000 Belleharbour Circle  
Apt 108

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Suffolk | State<br>VA | Zip Code<br>23435 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31266

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lisa West

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

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

Amount  
26.67

City State Zip Code  
Norfolk VA 23502

Transaction ID: D31152  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Lisa West

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

Amount  
23.33

City State Zip Code  
Norfolk VA 23502

Transaction ID: D31302  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Christina Harris

---

Mailing Address  
1354 29th Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

**Transaction ID:** D31527

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Janice Moody

---

Mailing Address  
105 St George Way  
Hampton, VA 23661

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23661 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

Amount  
20.00

**Transaction ID:** D31213

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Raylene Browder

Mailing Address  
537 Cedar Raod  
Chesapeake, VA 23321

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321 |
|--------------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

Amount  
20.00

Transaction ID: D31144

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Annette Bullock

Mailing Address  
1823 N 29th St  
Richmond, VA 23223

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

Transaction ID: D31465

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Medly Chanita

Mailing Address  
538 22nd Street  
Apt h

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
25.00

Transaction ID: D31499

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Racqueleona Clyburn

Mailing Address  
531 19th Street  
Apt B

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
16.67

Transaction ID: D31409

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |              |
|---|--------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <b>41.67</b> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| (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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
11 / 05 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jolyn Lewis

---

Mailing Address  
545 21st St  
Apt A

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31170

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jerry Jackson

---

Mailing Address  
813 23rd Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31480

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Linda Patillo

---

Mailing Address  
1509 Ellington Sq  
Portsmouth, VA 23701

---

|                                       |             |                   |
|---------------------------------------|-------------|-------------------|
| City<br>Portsmouth                    | State<br>VA | Zip Code<br>23701 |
| Purpose of Expenditure<br>GOTV Worker |             | Category/<br>Type |

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 1 |   | 0 5 |   | 2 0 0 6 |

Amount  

|       |
|-------|
| 16.66 |
|-------|

**Transaction ID:** D31336

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Rosalene Bullock

---

Mailing Address  
1604 N 28th St  
Richmond, VA 23223

---

|                                       |             |                   |
|---------------------------------------|-------------|-------------------|
| City<br>Richmond                      | State<br>VA | Zip Code<br>23223 |
| Purpose of Expenditure<br>GOTV Worker |             | Category/<br>Type |

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

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

Amount  

|       |
|-------|
| 30.00 |
|-------|

**Transaction ID:** D31095

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date 

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 1 |   | 0 5 |   | 2 0 0 6 |

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
DeAndre Barnes

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2216 Jefferson Ave  
Newport News, VA 23607

Amount  
30.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31568

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jamar Hunter

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
535 22nd St  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31579

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 55.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sherman Cotman

---

Mailing Address  
2221 Fairfield Ave  
Richmond, VA 23223

---

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Richmond | VA    | 23223    |

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31097

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
E Howard Mackin

---

Mailing Address  
5 Gregory Court  
Hampton, VA 23669

---

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Hampton | VA    | 23669    |

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
40.00

**Transaction ID:** D31521

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 70.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Beverly B. Davis

Mailing Address  
405 Russell Street  
Portsmouth, VA 23707

City State Zip Code  
Portsmouth VA 23707

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
16.67

Transaction ID: D31343

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Rene Lyons

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

City State Zip Code  
Norfolk VA 23523

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
23.33

Transaction ID: D31362

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |   |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">40.00</span> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
11 / 05 / 2006

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Justin Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31189

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Andrea Bullock

---

Mailing Address  
1823 N 29th St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31464

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lisa West

---

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

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

---

Amount  
26.67

**Transaction ID:** D31151

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

2732.98

Full Name (Last, First, Middle, Initial) of Payee  
Lavelle Clyburn

---

Mailing Address  
531 19th St  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

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

---

Amount  
20.00

**Transaction ID:** D31190

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

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

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

Amount  
30.00

City State Zip Code  
Richmond VA 23231

**Transaction ID:** D31089  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Curtis Berry

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

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

Amount  
20.00

City State Zip Code  
Hampton VA 23669

**Transaction ID:** D31244  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 2732.98

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jasmin Coleman

---

Mailing Address  
808 Bold Street  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31209

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Rosalene Bullock

---

Mailing Address  
1604 N 28th St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31462

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Otis Downtin

Mailing Address  
1718 Hodges Ferry Road  
Portsmouth, VA 23701-3848

City State Zip Code  
Portsmouth VA 23701-3848

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

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

Amount  
20.00

Transaction ID: D31137

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Racqueleona Clyburn

Mailing Address  
531 19th Street  
Apt B

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

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

Amount  
20.00

Transaction ID: D31184

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |              |
|---|--------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <b>40.00</b> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Nahjae Pender

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
801 Lassiter Drive  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31567

Purpose of Expenditure  
GOTV Worker

Category/Type

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sandre Lewis

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

Mailing Address  
544 22nd Street  
Apt C

Amount  
26.67

City State Zip Code  
Newport News VA 23607

Transaction ID: D31159

Purpose of Expenditure  
GOTV Worker

Category/Type

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 51.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tisha Smith

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1718 Hodges Ferry Rd  
Portsmouth, VA 23701-2113

Amount  
23.34

City State Zip Code  
Portsmouth VA 23701-2113

Transaction ID: D31294  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Anika Blair

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

Mailing Address  
2917 Ryland Rd  
Hampton, VA 23661

Amount  
20.00

City State Zip Code  
Hampton VA 23661

Transaction ID: D31271  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 43.34 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tyshon Lewis

---

Mailing Address  
544 22nd Street  
Apt C

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31437

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Justin Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31191

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Annie Giles

Mailing Address  
2516 Bethel St  
Richmond, VA 23223-3644

City State Zip Code  
Richmond VA 23223-3644

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: D31060

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Cecelia Cunningham

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

City State Zip Code  
Hampton VA 23669

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: D31231

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |                                    |
|---|------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <input type="text" value="50.00"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (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.

Abbi Easter  
Signature

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Michelle Warren

---

Mailing Address  
749 36th Street, Apt 4  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|  |       |
|--|-------|
|  | 25.00 |
|--|-------|

**Transaction ID:** D31481

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tisha Smith

---

Mailing Address  
1718 Hodges Ferry Rd  
Portsmouth, VA 23701-2113

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-2113 |
|--------------------|-------------|------------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|  |       |
|--|-------|
|  | 26.67 |
|--|-------|

**Transaction ID:** D31123

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |  |  |       |
|--|--|--|-------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">51.67</td> </tr> </table> |  | 51.67 |
|  | 51.67  |  |       |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">0.00</td> </tr> </table>  |  | 0.00  |
|  | 0.00   |  |       |
| <b>(c) TOTAL</b> Independent Expenditures .....                  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%;"></td> </tr> </table>                         |  |       |
|  |  |  |       |

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.

Abbi Easter  
 \_\_\_\_\_  
 Signature

Date 

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Terrell Debrew

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 22nd Street  
Apt C

Amount  
16.66

City State Zip Code  
Newport News VA 23607-5274

Transaction ID: D31435  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Archie Edwards

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1627 Wingfield Dr  
Hampton, VA 23661

Amount  
40.00

City State Zip Code  
Hampton VA 23661

Transaction ID: D31523  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 56.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Sonya Lewis

Mailing Address  
103 Navajo Trl  
Portsmouth, VA 23701-2429

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-2429 |
|--------------------|-------------|------------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

Amount  
26.67

**Transaction ID:** D31211

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lionel Brookins

Mailing Address  
301 Bertwick Ln  
Chesapeake, VA 23325

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23325 |
|--------------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

Amount  
20.00

**Transaction ID:** D31257

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lionel Brookins

---

Mailing Address  
301 Bertwick Ln  
Chesapeake, VA 23325

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23325 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31260

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Thomae Cunningham

---

Mailing Address  
801 Lassiter Drive  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31565

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Vanika Duck

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
649 12th Street  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31563  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Tyshon Lewis

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

Mailing Address  
544 22nd Street  
Apt C

Amount  
20.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31150  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Curtis Berry

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

Amount  
16.66

City State Zip Code  
Hampton VA 23669

Transaction ID: D31387  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tiera Glover

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

Amount  
16.66

City State Zip Code  
Norfolk VA 23502

Transaction ID: D31309  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 33.32 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sarah Motley

---

Mailing Address  
120 W Pembroke Ave  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31395

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Otis Dowtin

---

Mailing Address  
1718 Hodges Ferry Road  
Portsmouth, VA 23701-3848

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-3848 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31583

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

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

Mailing Address  
4706 Masondale Dr  
Richmond, VA 23234

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Richmond | VA    | 23234    |

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|       |
|-------|
| 30.00 |
|-------|

**Transaction ID:** D31108

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Roderyck Bullock

Mailing Address  
1604 N 28th St  
Richmond, VA 23223-5316

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Richmond | VA    | 23223-5316 |

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|       |
|-------|
| 35.00 |
|-------|

**Transaction ID:** D31461

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 65.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date 

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Raylene Browder

Mailing Address  
537 Cedar Raod  
Chesapeake, VA 23321

City State Zip Code  
Chesapeake VA 23321

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

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

Amount  
20.00

Transaction ID: D31141

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Stewart Adams

Mailing Address  
2726 High St  
Portsmouth, VA 23707-3522

City State Zip Code  
Portsmouth VA 23707-3522

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

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

Amount  
26.67

Transaction ID: D31202

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |   |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">46.67</span> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) TOTAL Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Roderyck Bullock

---

Mailing Address  
1604 N 28th St  
Richmond, VA 23223-5316

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223-5316 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
10.00

**Transaction ID:** D31117

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Ramon Clyburn

---

Mailing Address  
531 19th St  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31193

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 30.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Anaya Blair

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

City State Zip Code  
Hampton VA 23669

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: D31238

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Linda Patillo

Mailing Address  
1509 Ellington Sq  
Portsmouth, VA 23701

City State Zip Code  
Portsmouth VA 23701

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought

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

Amount

Transaction ID: D31228

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |                                    |
|---|------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <input type="text" value="46.67"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (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.

Abbi Easter  
Signature

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

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

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

---

Mailing Address  
1220 Caraway Court  
Suite 1040

---

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Largo | State<br>MD | Zip Code<br>20774 |
|---------------|-------------|-------------------|

---

|   |                   |
|---|-------------------|
| Purpose of Expenditure<br>Grassroots Campaign Materials | Category/<br>Type |
|---|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
699.18

**Transaction ID:** D31289

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Anika Blair

---

Mailing Address  
2917 Ryland Rd  
Hampton, VA 23661

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23661 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31368

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |        |
|--|--------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | 715.85 |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00   |
| <b>(c) TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Annette Bullock

---

Mailing Address  
1823 N 29th St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31058

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Thaddeus Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31140

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Giovanni Williford

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

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

Amount  
30.00

City State Zip Code  
Richmond VA 23222

Transaction ID: D31071  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Patricia Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

Amount  
25.00

City State Zip Code  
Richmond VA 23231

Transaction ID: D31470  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 55.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Thatiguss Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 A 21st Street  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31517  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Leslie Cox

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

Mailing Address  
1341 Mt. Vernon Ave  
Portsmouth, VA 23707

Amount  
20.00

City State Zip Code  
Portsmouth VA 23707

Transaction ID: D31242  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cecelia Cunningham

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

City State Zip Code  
Hampton VA 23669

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

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

Amount  
20.00

Transaction ID: D31232

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Otis Dowtin

Mailing Address  
1718 Hodges Ferry Road  
Portsmouth, VA 23701-3848

City State Zip Code  
Portsmouth VA 23701-3848

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31584

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rico Cunningham

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

City State Zip Code  
Hampton VA 23669

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31397

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Giovanni Williford

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

City State Zip Code  
Richmond VA 23222

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

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

Amount  
10.00

Transaction ID: D31118

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 26.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

---

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31155

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sonya Lewis

---

Mailing Address  
103 Navajo Trl  
Portsmouth, VA 23701-2429

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-2429 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

**Transaction ID:** D31329

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Ebony Picott

---

Mailing Address  
651 41st Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31557

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Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lionel Brookins

---

Mailing Address  
301 Bertwick Ln  
Chesapeake, VA 23325

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23325 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31258

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cateedra Lewis

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607-5643

City State Zip Code  
Newport News VA 23607-5643

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
11 / 05 / 2006

Amount  
25.00

Transaction ID: D31545

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jasmine Elliott

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

City State Zip Code  
Chesapeake VA 23321-4911

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
MM / DD / YYYY  
10 / 29 / 2006

Amount  
20.00

Transaction ID: D31182

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 45.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date MM / DD / YYYY  
11 / 05 / 2006

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

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Annie Giles

---

Mailing Address  
2516 Bethel St  
Richmond, VA 23223-3644

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223-3644 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|  |       |
|--|-------|
|  | 25.00 |
|--|-------|

**Transaction ID:** D31485

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Patrick Lewis

---

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 0 | D D<br>2 9 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

Amount  

|  |       |
|--|-------|
|  | 30.00 |
|--|-------|

**Transaction ID:** D31087

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date 

|            |            |                    |
|------------|------------|--------------------|
| M M<br>1 1 | D D<br>0 5 | Y Y Y Y<br>2 0 0 6 |
|------------|------------|--------------------|

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tiera Glover

---

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31167

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sandra DeBrew

---

Mailing Address  
544 22nd St  
APT C

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4541 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31445

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Gail Clyburn

Mailing Address  
545 Adams Dr  
Newport News, VA 23601

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23601 |
|----------------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
40.00

Transaction ID: D31503

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

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

Mailing Address  
638 Ridley Circle  
Newport News, VA 23607

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
30.00

Transaction ID: D31555

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 70.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Alicia Castro

Mailing Address  
2516 Bethel St  
Richmond, VA 23223-3644

City State Zip Code  
Richmond VA 23223-3644

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

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

Amount  
30.00

Transaction ID: D31052

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Bernetta Walker

Mailing Address  
3000 Belleharbour Circle  
Apt 108

City State Zip Code  
Suffolk VA 23435

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31349

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |   |
|--|---|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">46.67</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) <b>TOTAL</b> Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Kristal Lee

---

Mailing Address  
50 Tupelo Circle  
Hampton, VA 23666

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23666 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
35.00

**Transaction ID:** D31532

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lisa West

---

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.34

**Transaction ID:** D31303

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 58.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Justin Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31316

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Takeia Gibbs

---

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-2116 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31331

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Nicole Elliott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
23.33

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31312  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Tenille Clyburn

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

Mailing Address  
531 19th St  
Newport News, VA 23607-5284

Amount  
26.67

City State Zip Code  
Newport News VA 23607-5284

Transaction ID: D31198  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Janice Moody

---

Mailing Address  
105 St George Way  
Hampton, VA 23661

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23661 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31400

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Shanese Dickey

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
26.66

**Transaction ID:** D31278

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cardell Patillo, Jr.

---

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

**Transaction ID:** D31359

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Cecelia Cunningham

---

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31393

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 39.99 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cardel Patillo

---

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

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

---

Amount  
26.67

**Transaction ID:** D31270

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Curtis Berry

---

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

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

---

Amount  
20.00

**Transaction ID:** D31243

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

4162.63

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Orlando Lewis

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607-5643

City State Zip Code  
Newport News VA 23607-5643

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31451

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Inez Smith

Mailing Address  
1002 Home Ave  
Portsmouth, VA 23701

City State Zip Code  
Portsmouth VA 23701

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.66

Transaction ID: D31405

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |   |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">33.33</span> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) TOTAL Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Shanese Dickey

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
26.67

**Transaction ID:** D31277

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lionel Brookins

---

Mailing Address  
301 Bertwick Ln  
Chesapeake, VA 23325

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23325 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31377

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Cardell Patillo, Jr.

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

Amount  
23.33

City State Zip Code  
Portsmouth VA 23701

**Transaction ID:** D31360  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Ricky Walker

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
411 W Clay St  
Richmond, VA 23219

Amount  
25.00

City State Zip Code  
Richmond VA 23219

**Transaction ID:** D31491  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 48.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Andre Smith

---

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

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

---

Amount  
30.00

**Transaction ID:** D31054

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Linda Patillo

---

Mailing Address  
1509 Ellington Sq  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

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

---

Amount  
20.00

**Transaction ID:** D31230

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Patricia Lewis

---

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31084

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Troy Jones

---

Mailing Address  
169 Mytilene Dr  
Newport News, VA 23605-1853

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23605-1853 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31566

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 60.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Gregory Davis

Mailing Address  
1712 Brookfield St  
Richmond, VA 23222

City State Zip Code  
Richmond VA 23222

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

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

Amount  
10.00

Transaction ID: D31115

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Ramon Clyburn

Mailing Address  
531 19th St  
Apt B

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31415

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 26.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Frank Muhammad

---

Mailing Address  
255 B Union St  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
40.00

**Transaction ID:** D31526

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Orlando Lewis

---

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607-5643

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5643 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31130

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 60.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Ricky Walker

---

Mailing Address  
411 W Clay St  
Richmond, VA 23219

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23219 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
30.00

Transaction ID: D31091

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Darwin Duck

---

Mailing Address  
1533 Harbor Ln  
Newport News, VA 23607-5611

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5611 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

Transaction ID: D31561

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 55.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Antonio Patillo

---

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31356

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Otis Dowtin

---

Mailing Address  
1718 Hodges Ferry Road  
Portsmouth, VA 23701-3848

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-3848 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31295

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

Mailing Address  
1220 Caraway Court  
Suite 1040

City State Zip Code  
Largo MD 20774

Purpose of Expenditure Category/Type  
Grassroots Campaign Materials

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

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

Amount  
313.22

Transaction ID: D31048

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tiera Glover

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

City State Zip Code  
Norfolk VA 23502

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31307

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |        |
|--|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 329.89 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00   |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jeremiah Davis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
23609 Jefferson Ave  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31549  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Beverly B. Davis

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

Mailing Address  
405 Russell Street  
Portsmouth, VA 23707

Amount  
20.00

City State Zip Code  
Portsmouth VA 23707

Transaction ID: D31251  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Inez Smith

---

Mailing Address  
1002 Home Ave  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31403

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Nicole Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
26.67

**Transaction ID:** D31174

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Derrick Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |                      |
|---------------------------------------|-------------------|----------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type | <input type="text"/> |
|---------------------------------------|-------------------|----------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |                                      |
|---|--------------------------------------|
| Calendar Year-To-Date Per Election<br>for Office Sought | <input type="text" value="4162.63"/> |
|---|--------------------------------------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount

Transaction ID: D31429

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jalisa Keeling

---

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-2116 |
|-----------------|-------------|------------------------|

---

|                                       |                   |                      |
|---------------------------------------|-------------------|----------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type | <input type="text"/> |
|---------------------------------------|-------------------|----------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |                                      |
|---|--------------------------------------|
| Calendar Year-To-Date Per Election<br>for Office Sought | <input type="text" value="4162.63"/> |
|---|--------------------------------------|

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

---

Amount

Transaction ID: D31234

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |                                    |
|---|------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <input type="text" value="36.66"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (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.

---

Abbi Easter  
Signature

Date

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Shanese Dickey

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
26.67

**Transaction ID:** D31276

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Nia Hutchinson

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31253

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Bernetta Walker

---

Mailing Address  
3000 Belleharbour Circle  
Apt 108

---

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Suffolk | VA    | 23435    |

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31265

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Ricky Walker

---

Mailing Address  
411 W Clay St  
Richmond, VA 23219

---

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Richmond | VA    | 23219    |

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

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

---

Amount  
30.00

**Transaction ID:** D31090

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Terrell Debrew

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 22nd Street  
Apt C

Amount  
16.67

City State Zip Code  
Newport News VA 23607-5274

Transaction ID: D31433  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Tisha Smith

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1718 Hodges Ferry Rd  
Portsmouth, VA 23701-2113

Amount  
23.33

City State Zip Code  
Portsmouth VA 23701-2113

Transaction ID: D31293  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tenille Clyburn

Mailing Address  
531 19th St  
Newport News, VA 23607-5284

City State Zip Code  
Newport News VA 23607-5284

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

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

Amount  
26.66

Transaction ID: D31199

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Brenda Patillo

Mailing Address  
506 Roosevelt Blvd.  
Portsmouth, VA 23701

City State Zip Code  
Portsmouth VA 23701

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

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

Amount  
20.00

Transaction ID: D31280

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 46.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Nia Hutchinson

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31379

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lavelle Clyburn

---

Mailing Address  
531 19th St  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31413

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Anika Blair

---

Mailing Address  
2917 Ryland Rd  
Hampton, VA 23661

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23661 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31272

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Monchelle Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

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

---

Amount  
20.00

**Transaction ID:** D31175

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

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

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

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

---

Mailing Address  
50 Tueplo Circle  
Hampton, VA 23666

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23666 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31475

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jasmin Coleman

---

Mailing Address  
808 Bold Street  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31325

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

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

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sarah Motley

Mailing Address  
120 W Pembroke Ave  
Hampton, VA 23669

City State Zip Code  
Hampton VA 23669

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount  
20.00

Transaction ID: D31225

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Takeia Gibbs

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

City State Zip Code  
Norfolk VA 23502-2116

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.66

Transaction ID: D31333

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |              |
|--|--------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>36.66</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Walteria Williford

---

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23222 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31105

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Sterling Lyons

---

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31267

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

4162.63

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

|   |             |  |
|---|-------------|--|
| Full Name (Last, First, Middle, Initial) of Payee<br>James Dix                |             |  |
| Mailing Address<br>545 21st St<br>Newport News, VA 23607-5290                 |             |  |
| City<br>Newport News  | State<br>VA | Zip Code<br>23607-5290                                     |
| Purpose of Expenditure<br>GOTV Worker   |             | Category/<br>Type <input style="width:50px;" type="text"/> |
| Name of Federal Candidate supported or Opposed by expenditure:<br>Phil Kellam |             |  |
| Calendar Year-To-Date Per Election<br>for Office Sought                       |             | <input style="width:150px;" type="text" value="2732.98"/>  |

|   |     |     |     |         |         |     |  |     |  |         |
|---|-----|-----|-----|---------|---------|-----|--|-----|--|---------|
| Date<br><table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 9</td> <td></td> <td style="text-align: center;">2 0 0 6</td> </tr> </table> | M M | /   | D D | /       | Y Y Y Y | 1 0 |  | 2 9 |  | 2 0 0 6 |
| M M   | /   | D D | /   | Y Y Y Y |         |     |  |     |  |         |
| 1 0   |     | 2 9 |     | 2 0 0 6 |         |     |  |     |  |         |
| Amount<br><input style="width:150px;" type="text" value="26.67"/>   |     |     |     |         |         |     |  |     |  |         |
| <b>Transaction ID:</b> D31178   |     |     |     |         |         |     |  |     |  |         |
| Office Sought: <input checked="" type="checkbox"/> House State: VA<br><input type="checkbox"/> Senate District: 02<br><input type="checkbox"/> Presidential   |     |     |     |         |         |     |  |     |  |         |
| Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose  |     |     |     |         |         |     |  |     |  |         |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006<br><input type="checkbox"/> Other (specify) : _____   |     |     |     |         |         |     |  |     |  |         |

|   |             |  |
|---|-------------|--|
| Full Name (Last, First, Middle, Initial) of Payee<br>Sarah Motley             |             |  |
| Mailing Address<br>120 W Pembroke Ave<br>Hampton, VA 23669                    |             |  |
| City<br>Hampton   | State<br>VA | Zip Code<br>23669  |
| Purpose of Expenditure<br>GOTV Worker   |             | Category/<br>Type <input style="width:50px;" type="text"/> |
| Name of Federal Candidate supported or Opposed by expenditure:<br>Phil Kellam |             |  |
| Calendar Year-To-Date Per Election<br>for Office Sought                       |             | <input style="width:150px;" type="text" value="2732.98"/>  |

|   |     |     |     |         |         |     |  |     |  |         |
|---|-----|-----|-----|---------|---------|-----|--|-----|--|---------|
| Date<br><table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 9</td> <td></td> <td style="text-align: center;">2 0 0 6</td> </tr> </table> | M M | /   | D D | /       | Y Y Y Y | 1 0 |  | 2 9 |  | 2 0 0 6 |
| M M   | /   | D D | /   | Y Y Y Y |         |     |  |     |  |         |
| 1 0   |     | 2 9 |     | 2 0 0 6 |         |     |  |     |  |         |
| Amount<br><input style="width:150px;" type="text" value="20.00"/>   |     |     |     |         |         |     |  |     |  |         |
| <b>Transaction ID:</b> D31226   |     |     |     |         |         |     |  |     |  |         |
| Office Sought: <input checked="" type="checkbox"/> House State: VA<br><input type="checkbox"/> Senate District: 02<br><input type="checkbox"/> Presidential   |     |     |     |         |         |     |  |     |  |         |
| Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose  |     |     |     |         |         |     |  |     |  |         |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006<br><input type="checkbox"/> Other (specify) : _____   |     |     |     |         |         |     |  |     |  |         |

|  |   |
|--|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <input style="width:150px;" type="text" value="46.67"/> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <input style="width:150px;" type="text" value="0.00"/>  |
| <b>(c) TOTAL</b> Independent Expenditures .....                  | <input style="width:150px;" 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.

Abbi Easter  
 Signature \_\_\_\_\_ Date

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Dashawn Johnson

---

Mailing Address  
54 F Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31575

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Maurice Roberson

---

Mailing Address  
2521 Bethel St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31077

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Walteria Williford

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

Amount  
35.00

City State Zip Code  
Richmond VA 23222

Transaction ID: D31495  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Jerard Elliott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

Amount  
16.67

City State Zip Code  
Chesapeake VA 23321-4911

Transaction ID: D31319  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 51.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Antoine Harris

---

Mailing Address  
3017 Williams Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31448

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jasmin Coleman

---

Mailing Address  
808 Bold Street  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31327

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Brandy Davis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
23609 Jefferson Ave  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31552  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Tenille Clyburn

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
531 19th St  
Newport News, VA 23607-5284

Amount  
26.67

City State Zip Code  
Newport News VA 23607-5284

Transaction ID: D31200  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 51.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Patricia Lewis

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
2800 Yellow Spring Ct  
Richmond, VA 23231

Amount  
30.00

City State Zip Code  
Richmond VA 23231

**Transaction ID:** D31085  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Rico Cunningham

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

Amount  
20.00

City State Zip Code  
Hampton VA 23669

**Transaction ID:** D31221  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|  |              |
|--|--------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>50.00</b> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| <b>(c) TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Kima Pretlow

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
78 Williams Ln  
Williamsburg, VA 23888

Amount  
16.67

City State Zip Code  
Williamsburg VA 23888

Transaction ID: D31383

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Lemonte Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 22nd St  
APT C

Amount  
16.67

City State Zip Code  
Newport News VA 23607-4541

Transaction ID: D31453

Purpose of Expenditure Category/Type  
GOTV Worker

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
James Dix

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
Newport News, VA 23607-5290

Amount  
23.33

City State Zip Code  
Newport News VA 23607-5290

Transaction ID: D31419  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 2732.98

Full Name (Last, First, Middle, Initial) of Payee  
Sandre Lewis

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
544 22nd Street  
Apt C

Amount  
26.67

City State Zip Code  
Newport News VA 23607

Transaction ID: D31160  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 2732.98

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Levi Bradley

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
2221 Fairfield Ave  
Richmond, VA 23223

Amount  
30.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31074  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Lavelle Clyburn

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
531 19th St  
Apt B

Amount  
20.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31188  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rico Cunningham

---

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31220

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Marquita McConico

---

Mailing Address  
228 Chowas Trace  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31348

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Nia Hutchinson

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

City Norfolk State VA Zip Code 23502-3630

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date 11 / 05 / 2006

Amount 16.67  
Transaction ID: D31380

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Cheryl Sparrow

Mailing Address  
3148 Fairview St  
Norfolk, VA 23523

City Norfolk State VA Zip Code 23523

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date 10 / 29 / 2006

Amount 20.00  
Transaction ID: D31261

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 36.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 11 / 05 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lonnie Nowell

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
535 22nd Street  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31558  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Linemark Printing

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1220 Caraway Court  
Suite 1040

Amount  
279.67

City State Zip Code  
Largo MD 20774

Transaction ID: D31290  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
Grassroots Campaign Materials

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|   |        |
|---|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 304.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00   |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Najeania Cannon

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

City Richmond State VA Zip Code 23231

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date 10 / 29 / 2006

Amount 30.00

Transaction ID: D31078

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Nia Hutchinson

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

City Norfolk State VA Zip Code 23502-3630

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date 10 / 29 / 2006

Amount 20.00

Transaction ID: D31252

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 10 / 29 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
James Dix

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
Newport News, VA 23607-5290

Amount  
40.00

City State Zip Code  
Newport News VA 23607-5290

Transaction ID: D31514  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Sandra DeBrew

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
544 22nd St  
APT C

Amount  
20.00

City State Zip Code  
Newport News VA 23607-4541

Transaction ID: D31132  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 4162.63

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 60.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Terrell Debrew

Mailing Address  
544 22nd Street  
Apt C

City State Zip Code  
Newport News VA 23607-5274

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount  
20.00

Transaction ID: D31154

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jasmine Elliott

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

City State Zip Code  
Chesapeake VA 23321-4911

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount  
20.00

Transaction ID: D31180

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |              |
|--|--------------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <b>40.00</b> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| <b>(c) TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Lemonte Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 22nd St  
APT C

Amount  
16.66

City State Zip Code  
Newport News VA 23607-4541

**Transaction ID:** D31454  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Kima Pretlow

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
78 Williams Ln  
Williamsburg, VA 23888

Amount  
20.00

City State Zip Code  
Williamsburg VA 23888

**Transaction ID:** D31246  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|  |       |
|--|-------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.66 |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| <b>(c) TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rosalene Bullock

---

Mailing Address  
1604 N 28th St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31094

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Stewart Adams

---

Mailing Address  
2726 High St  
Portsmouth, VA 23707-3522

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23707-3522 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

**Transaction ID:** D31323

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 53.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Shanese Dickey

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

**Transaction ID:** D31365

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Cardell Patillo, Jr.

---

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.34

**Transaction ID:** D31358

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Andre Smith

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

Amount  
25.00

City State Zip Code  
Richmond VA 23231

Transaction ID: D31456  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Racqueleona Clyburn

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
531 19th Street  
Apt B

Amount  
20.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31183  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Antonio Patillo

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

Amount  
16.67

City State Zip Code  
Portsmouth VA 23701

**Transaction ID:** D31355  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Jakari Barnes

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
679 Ridley Circle  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

**Transaction ID:** D31519  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Janice Moody

Mailing Address  
105 St George Way  
Hampton, VA 23661

City State Zip Code  
Hampton VA 23661

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount  
20.00

Transaction ID: D31215

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Jerard Elliott

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

City State Zip Code  
Chesapeake VA 23321-4911

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

Transaction ID: D31320

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |              |
|---|--------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <b>36.67</b> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <b>0.00</b>  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tenille Clyburn

---

Mailing Address  
531 19th St  
Newport News, VA 23607-5284

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5284 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.34

**Transaction ID:** D31408

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Tyshon Lewis

---

Mailing Address  
544 22nd Street  
Apt C

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31149

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sonya Lewis

Mailing Address  
103 Navajo Trl  
Portsmouth, VA 23701-2429

City State Zip Code  
Portsmouth VA 23701-2429

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount

Transaction ID: D31212

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Giovanni Williford

Mailing Address  
1714 Jacquelyn St  
Richmond, VA 23222

City State Zip Code  
Richmond VA 23222

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount

Transaction ID: D31119

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |                                    |
|---|------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <input type="text" value="36.66"/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <input type="text" value="0.00"/>  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Knight

---

Mailing Address  
624  
44th Street

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31487

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Keila Turner

---

Mailing Address  
1613 Harbor Lane  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31553

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

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Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tammy Jenkins

---

Mailing Address  
1332 Tree Ridge Road  
Richmond, VA 23231

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23231 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31101

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Malinda Thornton

---

Mailing Address  
700 Waterfront Cir  
Apt 1107

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
40.00

**Transaction ID:** D31518

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 70.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Walter Robinson

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
104 Glinhurst Rd  
Richmond, VA 23223

Amount  
25.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31466  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Terrell Debrew

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
544 22nd Street  
Apt C

Amount  
20.00

City State Zip Code  
Newport News VA 23607-5274

Transaction ID: D31153  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 45.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Najeania Cannon

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

City Richmond State VA Zip Code 23231

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date 11 / 05 / 2006

Amount 25.00  
Transaction ID: D31457

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Orlando Lewis

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607-5643

City Newport News State VA Zip Code 23607-5643

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date 11 / 05 / 2006

Amount 16.67  
Transaction ID: D31450

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 41.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 11 / 05 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jalisa Keeling

---

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-2116 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31339

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Orlando Lewis

---

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607-5643

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5643 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31129

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b><br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Aquanetta Scott

Mailing Address  
1528 Coalter St  
Richmond, VA 23223

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Richmond | VA    | 23223    |

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 0 |   | 2 9 |   | 2 0 0 6 |

Amount

|       |
|-------|
| 30.00 |
|-------|

Transaction ID: D31063

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Aaron Harris

Mailing Address  
1503 Victoria Blvd  
Hampton, VA 23661

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Hampton | VA    | 23661    |

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 1 |   | 0 5 |   | 2 0 0 6 |

Amount

|       |
|-------|
| 25.00 |
|-------|

Transaction ID: D31474

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 0 |   | 2 9 |   | 2 0 0 6 |

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rene Lyons

---

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.34

**Transaction ID:** D31363

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Gregory Davis

---

Mailing Address  
1712 Brookfield St  
Richmond, VA 23222

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23222 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31051

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 53.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

---

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sarah Mae Cyrburn

---

Mailing Address  
717 20th Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

**Transaction ID:** D31504

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Bernetta Walker

---

Mailing Address  
3000 Belleharbour Circle  
Apt 108

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Suffolk | State<br>VA | Zip Code<br>23435 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.67

**Transaction ID:** D31350

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Jalisa Keeling

---

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-2116 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31337

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Rene Lyons

---

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
26.66

**Transaction ID:** D31282

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 43.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sandre DeBrew

---

Mailing Address  
544 C 22nd Street  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

**Transaction ID:** D31533

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Anaya Blair

---

Mailing Address  
2717 Ryland Rd  
Hampton, VA 23669

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23669 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
23.34

**Transaction ID:** D31388

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 48.34 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Antonio Patillo

---

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701 |
|--------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31357

---

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Nia Hutchinson

---

Mailing Address  
5409 Berry Hill Rd  
Norfolk, VA 23502-3630

---

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502-3630 |
|-----------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31254

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 36.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Janice Moody

Mailing Address  
105 St George Way  
Hampton, VA 23661

City State Zip Code  
Hampton VA 23661

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount  
20.00

Transaction ID: D31214

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sandre Lewis

Mailing Address  
544 22nd Street  
Apt C

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
23.34

Transaction ID: D31432

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 43.34 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lemont Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 C 22nd Street  
Newport News, VA 23607

Amount  
25.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31522  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/ Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Norma Robinson

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
1528 Coalter St  
Richmond, VA 23223

Amount  
30.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31083  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/ Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 55.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Raylene Browder

---

Mailing Address  
537 Cedar Raod  
Chesapeake, VA 23321

---

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321 |
|--------------------|-------------|-------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31300

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
George Johnson

---

Mailing Address  
532 N 21st St  
Richmond, VA 23223-7202

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223-7202 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31069

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 46.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Natalie Clarke

---

Mailing Address  
1604 N 28th St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31081

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Monchelle Lewis

---

Mailing Address  
545 21st St  
APT A

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31172

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 50.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Chenalo Lewis

Mailing Address  
1716 Terminal Ave  
Newport News, VA 23607-5643

City State Zip Code  
Newport News VA 23607-5643

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Calendar Year-To-Date Per Election for Office Sought 8117.26

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
25.00

Transaction ID: D31539

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sandra DeBrew

Mailing Address  
544 22nd St  
APT C

City State Zip Code  
Newport News VA 23607-4541

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
16.66

Transaction ID: D31447

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |   |
|--|---|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">41.66</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) <b>TOTAL</b> Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Justin Elliott

---

Mailing Address  
3400 Brandywine Dr  
Chesapeake, VA 23321-4911

---

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Chesapeake | State<br>VA | Zip Code<br>23321-4911 |
|--------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31186

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Bernetta Walker

---

Mailing Address  
3000 Belleharbour Circle  
Apt 108

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Suffolk | State<br>VA | Zip Code<br>23435 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31264

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Derrick Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
545 21st St  
APT A

Amount  
25.00

City State Zip Code  
Newport News VA 23607-5290

**Transaction ID:** D31535  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Leslie Cox

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1341 Mt. Vernon Ave  
Portsmouth, VA 23707

Amount  
16.66

City State Zip Code  
Portsmouth VA 23707

**Transaction ID:** D31342  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 4162.63

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Andre Smith

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
1102 Williamsburg Rd  
Richmond, VA 23231

Amount  
30.00

City State Zip Code  
Richmond VA 23231

Transaction ID: D31055  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4162.63

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Antonio Patillo

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
506 Roosevelt Blvd  
Portsmouth, VA 23701

Amount  
20.00

City State Zip Code  
Portsmouth VA 23701

Transaction ID: D31287  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
George Johnson

---

Mailing Address  
532 N 21st St  
Richmond, VA 23223-7202

---

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223-7202 |
|------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31068

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Walter Robinson

---

Mailing Address  
104 Glinhurst Rd  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31103

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Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 60.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Alicia Castro

Mailing Address  
2516 Bethel St  
Richmond, VA 23223-3644

City State Zip Code  
Richmond VA 23223-3644

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount  
30.00

Transaction ID: D31053

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sandre Lewis

Mailing Address  
544 22nd Street  
Apt C

City State Zip Code  
Newport News VA 23607

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Amount  
23.33

Transaction ID: D31431

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |   |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">53.33</span> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (c) TOTAL Independent Expenditures .....                  | <span style="border:1px solid black; padding:2px;"> </span>     |

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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rico Cunningham

Mailing Address  
1135 LaSalle Ave  
Hampton, VA 23669

City State Zip Code  
Hampton VA 23669

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Calendar Year-To-Date Per Election for Office Sought 4162.63

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount  
20.00

Transaction ID: D31219

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Takeia Gibbs

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

City State Zip Code  
Norfolk VA 23502-2116

Purpose of Expenditure Category/Type  
GOTV Worker

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Amount  
20.00

Transaction ID: D31217

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |   |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | <span style="border:1px solid black; padding:2px;">40.00</span> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | <span style="border:1px solid black; padding:2px;">0.00</span>  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Lavelle Clyburn

---

Mailing Address  
531 19th St  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31187

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Racqueleona Clyburn

---

Mailing Address  
531 19th Street  
Apt B

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
20.00

**Transaction ID:** D31185

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 40.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rene Lyons

---

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
23.33

**Transaction ID:** D31361

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Janice Moody

---

Mailing Address  
105 St George Way  
Hampton, VA 23661

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23661 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31402

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

4162.63

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 39.99 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Dontae Williams

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
1222 29th St  
Newport News, VA 23607

Amount  
30.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31562  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Jalisa Keeling

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
5384 Hanyen Dr  
Norfolk, VA 23502-2116

Amount  
20.00

City State Zip Code  
Norfolk VA 23502-2116

Transaction ID: D31235  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 50.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Milton Hill

---

Mailing Address  
2201 Chestnut Ave  
Hampton, VA 23666

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Hampton | State<br>VA | Zip Code<br>23666 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31540

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Cheryl Sparrow

---

Mailing Address  
3148 Fairview St  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31375

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 41.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Sterling Lyons

---

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23523 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.66

**Transaction ID:** D31372

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
James Roy West

---

Mailing Address  
5815 Frament Ave, #104  
Norfolk, VA 23502

---

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Norfolk | State<br>VA | Zip Code<br>23502 |
|-----------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
16.67

**Transaction ID:** D31304

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 33.33 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Eyonda Richardson

---

Mailing Address  
1537-A Jefferson Ave  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

Transaction ID: D31484

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Patricia Medley

---

Mailing Address  
538 22nd St  
APT H

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-4539 |
|----------------------|-------------|------------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
40.00

Transaction ID: D31507

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 65.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Tenille Clyburn

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
531 19th St  
Newport News, VA 23607-5284

Amount  
23.33

City State Zip Code  
Newport News VA 23607-5284

Transaction ID: D31407  
Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2732.98

Full Name (Last, First, Middle, Initial) of Payee  
Natalie Clarke

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

Mailing Address  
1604 N 28th St  
Richmond, VA 23223

Amount  
30.00

City State Zip Code  
Richmond VA 23223

Transaction ID: D31080  
Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
GOTV Worker

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
4162.63

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 53.33 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Ashley Stokes

---

Mailing Address  
885 Lassiter Dr  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

Transaction ID: D31576

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Sandre Lewis

---

Mailing Address  
544 22nd Street  
Apt C

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 8117.26 |
|---|---------|

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
26.66

Transaction ID: D31161

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 51.66 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Otis Downtin

---

Mailing Address  
1718 Hodges Ferry Road  
Portsmouth, VA 23701-3848

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|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Portsmouth | State<br>VA | Zip Code<br>23701-3848 |
|--------------------|-------------|------------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 2732.98 |
|---|---------|

Date  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 0 |   | 2 9 |   | 2 0 0 6 |

Amount  

|       |
|-------|
| 20.00 |
|-------|

**Transaction ID:** D31136

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
James Dix

---

Mailing Address  
545 21st St  
Newport News, VA 23607-5290

---

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607-5290 |
|----------------------|-------------|------------------------|

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|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

---

|   |         |
|---|---------|
| Calendar Year-To-Date Per Election<br>for Office Sought | 4162.63 |
|---|---------|

Date  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 0 |   | 2 9 |   | 2 0 0 6 |

Amount  

|       |
|-------|
| 26.66 |
|-------|

**Transaction ID:** D31177

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

|  |  |       |
|--|--|-------|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....   | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">46.66</td> </tr> </table> | 46.66 |
| 46.66  |  |       |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">0.00</td> </tr> </table>  | 0.00  |
| 0.00   |  |       |
| <b>(c) TOTAL</b> Independent Expenditures .....                  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: right;"> </td> </tr> </table>     |       |
|  |  |       |

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.

Abbi Easter  
 \_\_\_\_\_  
 Signature

Date 

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 1 0 |   | 2 9 |   | 2 0 0 6 |

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Maurice Roberson

---

Mailing Address  
2521 Bethel St  
Richmond, VA 23223

---

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Richmond | State<br>VA | Zip Code<br>23223 |
|------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
Bobby Scott

Date  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

---

Amount  
30.00

**Transaction ID:** D31076

---

Office Sought:  House State: VA  
 Senate District: 06  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

4162.63

Full Name (Last, First, Middle, Initial) of Payee  
Tyesha Pruden

---

Mailing Address  
1555 Ivy Ave  
Newport News, VA 23607

---

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Newport News | State<br>VA | Zip Code<br>23607 |
|----------------------|-------------|-------------------|

---

|                                       |                   |
|---------------------------------------|-------------------|
| Purpose of Expenditure<br>GOTV Worker | Category/<br>Type |
|---------------------------------------|-------------------|

---

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

---

Amount  
25.00

**Transaction ID:** D31577

---

Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought

8117.26

|  |       |
|--|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....   | 55.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | 0.00  |
| (c) <b>TOTAL</b> 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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 6

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C00155952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |   |

Full Name (Last, First, Middle, Initial) of Payee  
Rene Lyons

Mailing Address  
1615 Colon Ave  
Norfolk, VA 23523

City Norfolk State VA Zip Code 23523

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date 10 / 29 / 2006

Amount 26.67  
Transaction ID: D31283

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

Full Name (Last, First, Middle, Initial) of Payee  
Inez Smith

Mailing Address  
1002 Home Ave  
Portsmouth, VA 23701

City Portsmouth State VA Zip Code 23701

Purpose of Expenditure GOTV Worker Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Phil Kellam

Calendar Year-To-Date Per Election for Office Sought 2732.98

Date 10 / 29 / 2006

Amount 20.00  
Transaction ID: D31205

Office Sought:  House State: VA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General 2006  
 Other (specify) :

|   |       |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....   | 46.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... | 0.00  |
| (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.

Abbi Easter  
Signature

Date 10 / 29 / 2006

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia                              | FEC IDENTIFICATION NUMBER<br><b>C</b> C0015952 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice |  |

Full Name (Last, First, Middle, Initial) of Payee  
Lakendra Johnson

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
649 12th St  
Newport News, VA 23607

Amount  
30.00

City State Zip Code  
Newport News VA 23607

Transaction ID: D31551  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

Full Name (Last, First, Middle, Initial) of Payee  
Orlando Lewis

Date  
M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

Mailing Address  
544 22nd St  
Newport News, VA 23607-4541

Amount  
25.00

City State Zip Code  
Newport News VA 23607-4541

Transaction ID: D31520  
Office Sought:  House State: VA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
GOTV Worker

Category/  
Type

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
James Webb

Disbursement For:  Primary  General 2006  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election  
for Office Sought 8117.26

(a) SUBTOTAL of Itemized Independent Expenditures ..... 55.00

(b) SUBTOTAL of Unitemized Independent Expenditures ..... 0.00

(c) TOTAL Independent Expenditures ..... 15012.87

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.

Abbi Easter  
Signature

Date M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 6

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|  |  |   |
|--|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia  |  | <input type="checkbox"/> Check if<br>24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |
| If YES, name the designating committee:  | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |
|  | City<br>RICHMOND   | State ZIP Code<br>VA 23219                          |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Mark Hanna |  | Purpose of Expenditure<br>Election Day Can-<br>vasser | <input type="checkbox"/><br>Category/Type  |
| Mailing Address<br>4242 Brittany Ct Woodbridge, VA 22192            |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  |
| City<br>Woodbridge  | State<br>VA  | ZIP Code<br>22192                                     | Amount<br>60.00  |
| Name of Federal Candidate Supported<br>Andrew Hurst                 | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00 |  | Transaction ID: D32783                                |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Josh Self  |  | Purpose of Expenditure<br>Election Day Can-<br>vasser | <input type="checkbox"/><br>Category/Type  |
| Mailing Address<br>6509 Coachleigh Way Alexandria, VA 22315         |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  |
| City<br>Alexandria  | State<br>VA  | ZIP Code<br>22315                                     | Amount<br>60.00  |
| Name of Federal Candidate Supported<br>Andrew Hurst                 | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00 |  | Transaction ID: D32781                                |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Will Brownlee |  | Purpose of Expenditure<br>Election Day Can-<br>vasser | <input type="checkbox"/><br>Category/Type  |
| Mailing Address<br>16205 Cypress Ct. Montclair, VA 22025               |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  |
| City<br>Montclair  | State<br>VA  | ZIP Code<br>22025                                     | Amount<br>60.00  |
| Name of Federal Candidate Supported<br>Andrew Hurst                    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00    |  | Transaction ID: D32775                                |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Expenditures This Page (optional) .....       | <b>180.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|   |  |   |
|---|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia   |  | <input type="checkbox"/> Check if<br>24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, name the designating committee: | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |
|   | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |
|   | City<br>RICHMOND   | State ZIP Code<br>VA 23219                          |

|  |  |   |                          |               |
|--|--|---|--------------------------|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Mack Crouse Group |  | Purpose of Expenditure<br>Mail Program/Kel-<br>lam VA 6th | <input type="checkbox"/> | Category/Type |
| Mailing Address<br>308 N View Terrace Alexandria, VA 22301                 |  |   |                          |               |
| City<br>Alexandria   | State<br>VA  | ZIP Code<br>22301   |                          |               |
| Name of Federal Candidate Supported<br>Phil Kellam                         | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 02                                 |                          |               |
| Aggregate General Election Expenditure for this Candidate ▶                |  | 45123.95  |                          |               |
|  |  | <b>Transaction ID: D31673</b>                             |                          |               |

|   |                   |
|---|-------------------|
| Date<br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6  | Amount<br>9018.89 |
| <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                   |

|  |  |   |                          |               |
|--|--|---|--------------------------|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Mack Crouse Group |  | Purpose of Expenditure<br>Mail Program/Kel-<br>lam VA 6th | <input type="checkbox"/> | Category/Type |
| Mailing Address<br>308 N View Terrace Alexandria, VA 22301                 |  |   |                          |               |
| City<br>Alexandria   | State<br>VA  | ZIP Code<br>22301   |                          |               |
| Name of Federal Candidate Supported<br>Phil Kellam                         | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 02                                 |                          |               |
| Aggregate General Election Expenditure for this Candidate ▶                |  | 45123.95  |                          |               |
|  |  | <b>Transaction ID: D31672</b>                             |                          |               |

|   |                   |
|---|-------------------|
| Date<br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 6  | Amount<br>8581.94 |
| <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                   |

|  |  |   |                          |               |
|--|--|---|--------------------------|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Amy Reger |  | Purpose of Expenditure<br>Food Reimburse-<br>ment | <input type="checkbox"/> | Category/Type |
| Mailing Address<br>4220 Pickett Street Box 225                     |  |   |                          |               |
| City<br>The Plains   | State<br>VA  | ZIP Code<br>20198                                 |                          |               |
| Name of Federal Candidate Supported<br>Phil Kellam                 | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 02                         |                          |               |
| Aggregate General Election Expenditure for this Candidate ▶        |  | 45123.95  |                          |               |
|  |  | <b>Transaction ID: D31784</b>                     |                          |               |

|   |                   |
|---|-------------------|
| Date<br>M M / D D / Y Y Y Y<br>1 1 / 2 7 / 2 0 0 6  | Amount<br>3337.54 |
| <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                   |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Expenditures This Page (optional) .....       | <b>20938.37</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                 |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|   |  |   |                   |
|---|--|---|-------------------|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia   |  | <input type="checkbox"/> Check if<br>24-hour notice |                   |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br><br>If YES, name the designating committee: | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |                   |
|   | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |                   |
|   | City<br>RICHMOND   | State<br>VA   | ZIP Code<br>23219 |

|   |  |   |  |   |               |
|---|--|---|--|---|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Dan Cullen |  | Purpose of Expenditure<br>Election Day Can-<br>vasser |  |   | Category/Type |
| Mailing Address<br>7106 Layton Dr. Springfield, VA 22150            |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  | Amount<br><br>60.00   |               |
| City<br>Springfield   | State<br>VA  | ZIP Code<br>22150                                     |  |   |               |
| Name of Federal Candidate Supported<br>Andrew Hurst                 | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             |  |   |               |
| Aggregate General Election Expenditure for this Candidate ▶         |  | 1200.00   |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |               |
| <b>Transaction ID: D32774</b>                                       |  |   |  |   |               |

|  |  |   |  |   |               |
|--|--|---|--|---|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Alex Landivar |  | Purpose of Expenditure<br>Election Day Can-<br>vasser |  |   | Category/Type |
| Mailing Address<br>12089 Stallion Ct Woodbridge, VA 22192              |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  | Amount<br><br>60.00   |               |
| City<br>Woodbridge   | State<br>VA  | ZIP Code<br>22192                                     |  |   |               |
| Name of Federal Candidate Supported<br>Andrew Hurst                    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             |  |   |               |
| Aggregate General Election Expenditure for this Candidate ▶            |  | 1200.00   |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |               |
| <b>Transaction ID: D32788</b>  |  |   |  |   |               |

|  |  |   |  |   |               |
|--|--|---|--|---|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Arash Ghaderi |  | Purpose of Expenditure<br>Election Day Can-<br>vasser |  |   | Category/Type |
| Mailing Address<br>9525 Parsonage Lane Lorton, VA 22079                |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  | Amount<br><br>60.00   |               |
| City<br>Lorton   | State<br>VA  | ZIP Code<br>22079                                     |  |   |               |
| Name of Federal Candidate Supported<br>Andrew Hurst                    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             |  |   |               |
| Aggregate General Election Expenditure for this Candidate ▶            |  | 1200.00   |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |               |
| <b>Transaction ID: D32782</b>  |  |   |  |   |               |

|   |        |
|---|--------|
| SUBTOTAL of Expenditures This Page (optional) .....       | 180.00 |
| TOTAL This Period (last page this line number only) ..... |        |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|   |  |   |
|---|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia   |  | <input type="checkbox"/> Check if<br>24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, name the designating committee: | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |
|   | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |
|   | City<br>RICHMOND   | State ZIP Code<br>VA 23219                          |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Maya Jennings |  | Purpose of Expenditure<br>Election Day Can-<br>vasser | <input type="checkbox"/><br>Category/Type  |
| Mailing Address<br>7903 Bentley Village Dr. Springfield, VA 22152      |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  |
| City<br>Springfield  | State<br>VA  | ZIP Code<br>22152                                     | Amount<br>60.00  |
| Name of Federal Candidate Supported<br>Andrew Hurst                    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00    |  | Transaction ID: D32784                                |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Nabil Baz  |  | Purpose of Expenditure<br>Election Day Can-<br>vasser | <input type="checkbox"/><br>Category/Type  |
| Mailing Address<br>6807 Hackberry Street Springfield, VA 22152      |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  |
| City<br>Springfield   | State<br>VA  | ZIP Code<br>22152                                     | Amount<br>60.00  |
| Name of Federal Candidate Supported<br>Andrew Hurst                 | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00 |  | Transaction ID: D32780                                |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>GMMB        |  | Purpose of Expenditure<br>Radio Media/Scott<br>VA  | <input type="checkbox"/><br>Category/Type  |
| Mailing Address  |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 1 / 2 0 0 6 |  |
| City   | State  | ZIP Code   | Amount<br>10000.00   |
| Name of Federal Candidate Supported<br>Bobby Scott                   | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 06                          | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 11362.89 |  | Transaction ID: D31680                             |  |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Expenditures This Page (optional) .....       | <b>10120.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                 |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|  |  |   |
|--|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia  |  | <input type="checkbox"/> Check if<br>24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |
| If YES, name the designating committee:  | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |
|  | City<br>RICHMOND   | State ZIP Code<br>VA 23219                          |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Amy Weber  |  | Purpose of Expenditure<br>Election Day Can-<br>vasser | <input type="checkbox"/><br>Category/Type  |
| Mailing Address<br>8277 Wood Den Ct Springfield, VA 22153           |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  |
| City<br>Springfield   | State<br>VA  | ZIP Code<br>22153                                     | Amount<br>60.00  |
| Name of Federal Candidate Supported<br>Andrew Hurst                 | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00 |  | Transaction ID: D32778                                |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>David Morales |  | Purpose of Expenditure<br>Election Day Can-<br>vasser | <input type="checkbox"/><br>Category/Type  |
| Mailing Address<br>4438 Hendricks Drive Woodbridge, VA 22193           |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  |
| City<br>Woodbridge   | State<br>VA  | ZIP Code<br>22193                                     | Amount<br>60.00  |
| Name of Federal Candidate Supported<br>Andrew Hurst                    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00    |  | Transaction ID: D32787                                |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Erin Lamb  |  | Purpose of Expenditure<br>Election Day Can-<br>vasser | <input type="checkbox"/><br>Category/Type  |
| Mailing Address<br>1011 Arlington Blvd #317                         |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6    |  |
| City<br>Arlington   | State<br>VA  | ZIP Code<br>22209                                     | Amount<br>60.00  |
| Name of Federal Candidate Supported<br>Andrew Hurst                 | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11                             | <input type="checkbox"/> Limit Raised Due to Opponent's<br>Spending (2 U.S.C 441a(i)/441a-1) |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00 |  | Transaction ID: D32777                                |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Expenditures This Page (optional) .....       | <b>180.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|  |  |   |
|--|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia  |  | <input type="checkbox"/> Check if<br>24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |
| If YES, name the designating committee:  | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |
|  | City<br>RICHMOND   | State ZIP Code<br>VA 23219                          |

|   |  |   |                          |
|---|--|---|--------------------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>US Postmaster                            |  | Purpose of Expenditure<br>Mail Postage/Kel- lam VA 6th                                    | <input type="checkbox"/> |
| Mailing Address<br>Merrifield Postal Store Merrifield, VA 22081                                   |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 1 / 2 0 0 6  | Category/Type            |
| City State ZIP Code<br>Merrifield VA 22081  |  |   |                          |
| Name of Federal Candidate Supported<br>Phil Kellam  | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: VA District: 02  |                          |
| Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="45123.95"/> |  | Amount<br><input type="text" value="1123.39"/>  |                          |
| Transaction ID: D31679  |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                          |

|   |   |   |                          |
|---|---|---|--------------------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Media Strategies & Research              |   | Purpose of Expenditure<br>Candidate Media Buy/Feder                                       | <input type="checkbox"/> |
| Mailing Address<br>1580 Lincoln St Ste 510 Denver, CO 80203-1507                                  |   | Date<br>M M / D D / Y Y Y Y<br>1 0 / 2 6 / 2 0 0 6  | Category/Type            |
| City State ZIP Code<br>Denver CO 80203-1507   |   |   |                          |
| Name of Federal Candidate Supported   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: _____ District: _____  |                          |
| Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="75000.00"/> |   | Amount<br><input type="text" value="75000.00"/>   |                          |
| Transaction ID: D32818  |   | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                          |

|  |  |   |                          |
|--|--|---|--------------------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Chris Mier                              |  | Purpose of Expenditure<br>Election Day Can- vasser  | <input type="checkbox"/> |
| Mailing Address<br>16092 Deer Park Dr. Montclair, VA 22025                                       |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  | Category/Type            |
| City State ZIP Code<br>Montclair VA 22025  |  |   |                          |
| Name of Federal Candidate Supported<br>Andrew Hurst  | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential | State: VA District: 11  |                          |
| Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="1200.00"/> |  | Amount<br><input type="text" value="60.00"/>  |                          |
| Transaction ID: D32776   |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                          |

|  |                                       |
|--|---------------------------------------|
| <b>SUBTOTAL</b> of Expenditures This Page (optional) .....       | <input type="text" value="76183.39"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text" value=""/>         |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|   |  |   |
|---|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia   |  | <input type="checkbox"/> Check if<br>24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, name the designating committee: | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |
|   | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |
|   | City<br>RICHMOND   | State ZIP Code<br>VA 23219                          |

|  |  |   |                          |               |
|--|--|---|--------------------------|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Edwin Marquez |  | Purpose of Expenditure<br>Election Day Can-<br>vasser                                     | <input type="checkbox"/> | Category/Type |
| Mailing Address<br>12322 Aztec Place Woodbridge, VA 22192              |  |   |                          |               |
| City State ZIP Code<br>Woodbridge VA 22192                             |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |                          |               |
| Name of Federal Candidate Supported<br>Andrew Hurst                    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11   | Amount<br>60.00          |               |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00    |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                          |               |
| <b>Transaction ID: D32790</b>  |  |   |                          |               |

|  |  |   |                          |               |
|--|--|---|--------------------------|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Donald Brownlee |  | Purpose of Expenditure<br>Election Day Can-<br>vasser                                     | <input type="checkbox"/> | Category/Type |
| Mailing Address<br>16205 Cypress Ct. Montclair, VA 22025                 |  |   |                          |               |
| City State ZIP Code<br>Montclair VA 22025                                |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |                          |               |
| Name of Federal Candidate Supported<br>Andrew Hurst                      | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11   | Amount<br>60.00          |               |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00      |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                          |               |
| <b>Transaction ID: D32791</b>  |  |   |                          |               |

|  |  |   |                          |               |
|--|--|---|--------------------------|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Donald Brownlee |  | Purpose of Expenditure<br>Election Day Can-<br>vasser                                     | <input type="checkbox"/> | Category/Type |
| Mailing Address<br>16205 Cypress Ct. Montclair, VA 22025                 |  |   |                          |               |
| City State ZIP Code<br>Montclair VA 22025                                |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |                          |               |
| Name of Federal Candidate Supported<br>Andrew Hurst                      | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11   | Amount<br>60.00          |               |
| Aggregate General Election Expenditure for this Candidate ▶ 1200.00      |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |                          |               |
| <b>Transaction ID: D32793</b>  |  |   |                          |               |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Expenditures This Page (optional) .....       | <b>180.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|   |  |   |
|---|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia   |  | <input type="checkbox"/> Check if<br>24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, name the designating committee: | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |
|   | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |
|   | City<br>RICHMOND   | State ZIP Code<br>VA 23219                          |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Donald Brownlee  |  | Purpose of Expenditure<br>Election Day Can-<br>vasser                                     | <input type="checkbox"/><br>Category/Type                        |
| Mailing Address<br>16205 Cypress Ct. Montclair, VA 22025  |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |  |
| City<br>Montclair   | State<br>VA  | ZIP Code<br>22025   | Amount<br><input style="width:100%;" type="text" value="60.00"/> |
| Name of Federal Candidate Supported<br>Andrew Hurst   | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11   |  |
| Aggregate General Election Expenditure for this Candidate ▶ <input style="width:100%;" type="text" value="1200.00"/><br><b>Transaction ID:</b> D32792 |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Miranda Becker   |  | Purpose of Expenditure<br>Election Day Can-<br>vasser                                     | <input type="checkbox"/><br>Category/Type                        |
| Mailing Address<br>16149 Darwin Ct Woodbridge, VA 22191   |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |  |
| City<br>Woodbridge  | State<br>VA  | ZIP Code<br>22191   | Amount<br><input style="width:100%;" type="text" value="60.00"/> |
| Name of Federal Candidate Supported<br>Andrew Hurst   | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11   |  |
| Aggregate General Election Expenditure for this Candidate ▶ <input style="width:100%;" type="text" value="1200.00"/><br><b>Transaction ID:</b> D32786 |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Brian Simmons  |  | Purpose of Expenditure<br>Election Day Can-<br>vasser                                     | <input type="checkbox"/><br>Category/Type                        |
| Mailing Address<br>4109 Sunburst Ct Alexandria, VA 22303  |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6  |  |
| City<br>Alexandria  | State<br>VA  | ZIP Code<br>22303   | Amount<br><input style="width:100%;" type="text" value="60.00"/> |
| Name of Federal Candidate Supported<br>Andrew Hurst   | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | State: VA<br>District: 11   |  |
| Aggregate General Election Expenditure for this Candidate ▶ <input style="width:100%;" type="text" value="1200.00"/><br><b>Transaction ID:</b> D32779 |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |  |

|  |   |
|--|---|
| <b>SUBTOTAL</b> of Expenditures This Page (optional) .....       | <input style="width:100%;" type="text" value="180.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input style="width:100%;" type="text"/>                |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|  |  |  |                            |
|--|--|--|----------------------------|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia  |  | <input type="checkbox"/> Check if<br>24-hour notice                |                            |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |  | Full Name of Subordinate Committee<br>Democratic Party of Virginia |                            |
| If YES, name the designating committee:  |  | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |                            |
|  |  | City<br>RICHMOND   | State ZIP Code<br>VA 23219 |

  

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Winning Directions  | Purpose of Expenditure<br>GOTV Calls - 441 Kellam           | <input type="checkbox"/><br>Category/Type   |
| Mailing Address<br>1366 San Mateo Avenue South San Francisco, CA 94080   | Date<br>MM / DD / YYYY<br>11 / 02 / 2006                    | Amount<br>11110.54  |
| City<br>South San Francisco CA 94080   | Name of Federal Candidate Supported<br>Phil Kellam          | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential<br>State: VA District: 02 | Aggregate General Election Expenditure for this Candidate ▶ | Transaction ID: D31681  |
| 45123.95   |   |   |

  

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial) of Each Payee<br>PROMOS  | Purpose of Expenditure<br>Grassroots Campaign Materials/Scott | <input type="checkbox"/><br>Category/Type   |
| Mailing Address<br>PO Box 13011 Norfolk, VA 23506-0011   | Date<br>MM / DD / YYYY<br>11 / 15 / 2006                      | Amount<br>1362.89   |
| City<br>Norfolk VA 23506-0011  | Name of Federal Candidate Supported<br>Bobby Scott            | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential<br>State: VA District: 06 | Aggregate General Election Expenditure for this Candidate ▶   | Transaction ID: D33129  |
| 11362.89   |   |   |

  

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial) of Each Payee<br>Michelle Soto   | Purpose of Expenditure<br>Election Day Cans                 | <input type="checkbox"/><br>Category/Type   |
| Mailing Address<br>13176 Tory Loop Woodbridge, VA 22192  | Date<br>MM / DD / YYYY<br>11 / 07 / 2006                    | Amount<br>60.00   |
| City<br>Woodbridge VA 22192  | Name of Federal Candidate Supported<br>Andrew Hurst         | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1) |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential<br>State: VA District: 11 | Aggregate General Election Expenditure for this Candidate ▶ | Transaction ID: D32789  |
| 1200.00  |   |   |

  

|   |          |
|---|----------|
| SUBTOTAL of Expenditures This Page (optional) .....       | 12533.43 |
| TOTAL This Period (last page this line number only) ..... |          |

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

|   |  |   |
|---|--|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia   |  | <input type="checkbox"/> Check if<br>24-hour notice |
| Has your committee been designated to make coordinated expenditures by a political party committee?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, name the designating committee: | Full Name of Subordinate Committee<br>Democratic Party of Virginia |   |
|   | Mailing Address<br>1108 E MAIN STREET, 2ND FLOOR                   |   |
|   | City<br>RICHMOND   | State ZIP Code<br>VA 23219                          |

|  |  |  |               |
|--|--|--|---------------|
| Full Name (Last, First, Middle Initial) of Each Payee<br>David Braga   |  | Purpose of Expenditure<br>Election Day Can-<br>vasser  | Category/Type |
| Mailing Address<br>3076 Woodscone Lane Woodbridge, VA 22192  |  | Date<br>M M / D D / Y Y Y Y<br>1 1 / 0 7 / 2 0 0 6   |               |
| City State ZIP Code<br>Woodbridge VA 22192   |  |  |               |
| Name of Federal Candidate Supported<br>Andrew Hurst  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> Presidential | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;">60.00</div> |               |
| Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">1200.00</div> |  | <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)    |               |
| <b>Transaction ID: D32785</b>  |  |  |               |

|   |   |
|---|---|
| SUBTOTAL of Expenditures This Page (optional) .....       | <div style="border: 1px solid black; padding: 2px;">60.00</div>     |
| TOTAL This Period (last page this line number only) ..... | <div style="border: 1px solid black; padding: 2px;">120735.19</div> |

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Democratic Party of Virginia

|                                |   |                                      |
|--------------------------------|---|--------------------------------------|
| NAME OF ACCOUNT<br>Non-Federal | DATE OF RECEIPT<br>M M / D D / Y Y Y Y<br>1 1 / 1 6 / 2 0 0 6 | TOTAL AMOUNT TRANSFERRED<br>67403.58 |
|--------------------------------|---|--------------------------------------|

|  |  |                     |
|--|--|---------------------|
| BREAKDOWN OF TRANSFER RECEIVED                                     |  | 67403.58            |
| i) Total Administrative .....                                      |  | Transaction ID: T41 |
| ii) Generic Voter Drive .....                                      |  | Transaction ID:     |
| iii) Exempt Activities .....                                       |  | Transaction ID:     |
| iv) Direct Fundraising (List Activity or Event Identifier)         |  |                     |
| a) _____   |  | Transaction ID:     |
| b) _____   |  | Transaction ID:     |
| c) Total Amount Transferred for Direct Fundraising .....           |  |                     |
| v) Direct Candidate Support (List of Activity or Event Identifier) |  |                     |
| a) _____   |  | Transaction ID:     |
| b) _____   |  | Transaction ID:     |
| c) Total Amount Transferred For Direct Candidate Support .....     |  |                     |
| vi) Public Communications Referring Only to Party (Made by PAC)    |  | Transaction ID:     |

|   |          |
|---|----------|
| TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED                               |          |
| TOTAL This Period (Administrative) .....                                | 67403.58 |
| TOTAL This Period (Generic Voter Drive) .....                           | 0.00     |
| TOTAL This Period (Exempt Activities) .....                             | 0.00     |
| TOTAL This Period (Direct Fundraising) .....                            | 0.00     |
| TOTAL This Period (Direct Candidate Support) .....                      | 0.00     |
| TOTAL This Period (Public Communications Referring Only to Party) ..... | 0.00     |
| TOTAL This Period (Total Amount Transferred) .....                      | 67403.58 |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A. Full Name (Last, First, Middle Initial)**  
The Supply Room Companies, Inc.

Mailing Address  
PO Box 6887

|          |       |            |                   |
|----------|-------|------------|-------------------|
| City     | State | Zip Code   | Category/<br>Type |
| Richmond | VA    | 23230-0887 |                   |

Purpose of Disbursement:  
Office Supplies

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
360805.22

Date   /   /      
**Transaction ID:** D31626H4

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 73.48         |   | 276.44           |   | 349.92       |

**B. Full Name (Last, First, Middle Initial)**  
Warren Richards

Mailing Address  
919 Druid Cir Apt #7

|         |       |          |                   |
|---------|-------|----------|-------------------|
| City    | State | Zip Code | Category/<br>Type |
| Norfolk | VA    | 23504    |                   |

Purpose of Disbursement:  
Payroll

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
360805.22

Date   /   /     
**Transaction ID:** D31608H4

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 195.93        |   | 737.07           |   | 933.00       |

**C. Full Name (Last, First, Middle Initial)**  
Southern Copier Sales & Service

Mailing Address  
PO Box 82

|                |       |            |                   |
|----------------|-------|------------|-------------------|
| City           | State | Zip Code   | Category/<br>Type |
| Mechanicsville | VA    | 23111-0082 |                   |

Purpose of Disbursement:  
Copier Supplies

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
360805.22

Date   /   /     
**Transaction ID:** D31654H4

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 95.85         |   | 360.61           |   | 456.46       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 365.26        |   | 1374.12          |   | 1739.38      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Jamie Nolan |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>7103 Fernwood St #2622                        |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Richmond   | State<br>VA | Zip Code<br>23228 | Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Mileage Reimbursement                |             |                   | Transaction ID: D31649H4  |  |  |
| Activity or Event Identifier:<br>Administrative                  |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 13.02         |   | 48.98            |   | 62.00        |

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Political CFOS, Inc |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>6715 Wiliams Drive                                    |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Alexandria   | State<br>VA | Zip Code<br>22307 | Date <input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Compliance Consulting Fees                   |             |                   | Transaction ID: D31693H4  |  |  |
| Activity or Event Identifier:<br>Administrative                          |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 843.93        |   | 3174.79          |   | 4018.72      |

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Diamond Springs |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>2400 Charles City Rd                              |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Richmond   | State<br>VA | Zip Code<br>23231-4402 | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Water Service                            |             |                        | Transaction ID: D31756H4  |  |  |
| Activity or Event Identifier:<br>Administrative                      |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 11.39         |   | 42.85            |   | 54.24        |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 868.34        |   | 3266.62          |   | 4134.96      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>FedEx Kinko's |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>111 E Main St                                   |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Richmond   | State<br>VA | Zip Code<br>23219-2111 | Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Shipping                               |             |                        | Transaction ID: D31618H4  |  |  |
| Activity or Event Identifier:<br>Administrative                    |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 14.55         |   | 54.75            |   | 69.30        |

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>FedEx Kinko's |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>111 E Main St                                   |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Richmond   | State<br>VA | Zip Code<br>23219-2111 | Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Shipping                               |             |                        | Transaction ID: D31617H4  |  |  |
| Activity or Event Identifier:<br>Administrative                    |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 17.96         |   | 67.57            |   | 85.53        |

|   |             |                        |   |  |  |
|---|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>ABBA, Inc. |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>1601 Anderson Hwy                            |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Powhatan  | State<br>VA | Zip Code<br>23139-8008 | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Machine Maintenance                 |             |                        | Transaction ID: D31771H4  |  |  |
| Activity or Event Identifier:<br>Administrative                 |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 164.49        |   | 618.81           |   | 783.30       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 197.00        |   | 741.13           |   | 938.13       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

**A.** Full Name (Last, First, Middle Initial)  
Purchase Power

Mailing Address  
PO Box 856042

City State Zip Code  
Louisville KY 40285-6042

Purpose of Disbursement:  
Postage

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

360805.22

Date   /   /

Transaction ID: D31630H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
457.45 + 1720.92 = 2178.37

**B.** Full Name (Last, First, Middle Initial)  
tinyHorse Solutions, LLC

Mailing Address  
937 President St #4A

City State Zip Code  
Brooklyn NY 11215

Purpose of Disbursement:  
Software License

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

360805.22

Date   /   /

Transaction ID: D31755H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
430.50 + 1619.50 = 2050.00

**C.** Full Name (Last, First, Middle Initial)  
Ivy Baptist Church

Mailing Address  
2702 Chestnut Ave

City State Zip Code  
Newport News VA 23607

Purpose of Disbursement:  
Site Rental

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

360805.22

Date   /   /

Transaction ID: D31739H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
158.66 + 596.89 = 755.55

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
1046.61 + 3937.31 = 4983.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                        |   |  |
|--|-------------|------------------------|---|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Verizon |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address<br>PO Box 17577                              |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |
| City<br>Baltimore  | State<br>MD | Zip Code<br>21297-0513 | Date<br>M M / D D / Y Y Y Y<br>1 0 / 2 3 / 2 0 0 6  |  |
| Purpose of Disbursement:<br>Telephone Service                |             |                        | Transaction ID: D31616H4  |  |
| Activity or Event Identifier:<br>Administrative              |             |                        |   |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 183.03        |   | 688.56           |   | 871.59       |

|  |             |                        |   |  |
|--|-------------|------------------------|---|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Verizon |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address<br>PO Box 17577                              |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |
| City<br>Baltimore  | State<br>MD | Zip Code<br>21297-0513 | Date<br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6  |  |
| Purpose of Disbursement:<br>Telephone Service                |             |                        | Transaction ID: D31758H4  |  |
| Activity or Event Identifier:<br>Administrative              |             |                        |   |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 40.68         |   | 153.04           |   | 193.72       |

|  |             |                        |   |  |
|--|-------------|------------------------|---|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Lexis Nexis |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address<br>PO Box 933                                    |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |
| City<br>Dayton   | State<br>OH | Zip Code<br>45401-0933 | Date<br>M M / D D / Y Y Y Y<br>1 1 / 1 5 / 2 0 0 6  |  |
| Purpose of Disbursement:<br>Research Services                    |             |                        | Transaction ID: D31765H4  |  |
| Activity or Event Identifier:<br>Administrative                  |             |                        |   |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 63.42         |   | 238.58           |   | 302.00       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 287.13        |   | 1080.18          |   | 1367.31      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |       |            |   |  |  |
|--|-------|------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Lexis Nexis |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 933                                    |       |            | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City   | State | Zip Code   | Category/<br>Type   |  |  |
| Dayton   | OH    | 45401-0933 |   |  |  |
| Purpose of Disbursement:<br>Research Service Fees                |       |            | Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>  |  |  |
| Activity or Event Identifier:<br>Administrative                  |       |            | Transaction ID: D31629H4  |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 63.42         |   | 238.58           |   | 302.00       |

|  |       |          |   |  |  |
|--|-------|----------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Cingular Wireless |       |          | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>P.O. Box 17356                                      |       |          | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City   | State | Zip Code | Category/<br>Type   |  |  |
| Baltimore  | MD    | 21297    |   |  |  |
| Purpose of Disbursement:<br>Cell Phones                                |       |          | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Activity or Event Identifier:<br>Administrative                        |       |          | Transaction ID: D31766H4  |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 15.59         |   | 58.69            |   | 74.28        |

|   |       |            |   |  |  |
|---|-------|------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>De Lage Landen Financial |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 41601   |       |            | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City  | State | Zip Code   | Category/<br>Type   |  |  |
| Philadelphia  | PA    | 19101-1601 |   |  |  |
| Purpose of Disbursement:<br>Office Equipment Lease                            |       |            | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Activity or Event Identifier:<br>Administrative                               |       |            | Transaction ID: D31764H4  |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 140.76        |   | 529.57           |   | 670.33       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 219.77        |   | 826.84           |   | 1046.61      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |                        |  |  |
|---|-------------|------------------------|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>De Lage Landen Financial |             |                        | <b>Type of Allocated Activity:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address<br>PO Box 41601   |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22  |  |
| City<br>Philadelphia  | State<br>PA | Zip Code<br>19101-1601 | Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br>1 0 / 2 3 / 2 0 0 6<br><b>Transaction ID:</b> D31611H4   |  |
| Purpose of Disbursement:<br>Office Equipment Lease                            |             |                        |  |  |
| Activity or Event Identifier:<br>Administrative                               |             |                        |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 105.41        |   | 396.57           |   | 501.98       |

|   |             |                        |  |  |
|---|-------------|------------------------|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>De Lage Landen Financial |             |                        | <b>Type of Allocated Activity:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address<br>PO Box 41601   |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22  |  |
| City<br>Philadelphia  | State<br>PA | Zip Code<br>19101-1601 | Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br>1 0 / 2 3 / 2 0 0 6<br><b>Transaction ID:</b> D31628H4   |  |
| Purpose of Disbursement:<br>Office Equipment Lease                            |             |                        |  |  |
| Activity or Event Identifier:<br>Administrative                               |             |                        |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 75.90         |   | 285.55           |   | 361.45       |

|   |             |                   |  |  |
|---|-------------|-------------------|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>David John Mills |             |                   | <b>Type of Allocated Activity:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address<br>2300 East Cary Street   Apartment #523             |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22  |  |
| City<br>Richmond  | State<br>VA | Zip Code<br>23223 | Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br>1 0 / 2 7 / 2 0 0 6<br><b>Transaction ID:</b> D31652H4   |  |
| Purpose of Disbursement:<br>Mileage Reimbursement                     |             |                   |  |  |
| Activity or Event Identifier:<br>Administrative                       |             |                   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 36.90         |   | 138.85           |   | 175.75       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 218.21        |   | 820.97           |   | 1039.18      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Frank Parsons Paper Company |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>6715-B Electronic Drive                                       |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Springfield  | State<br>VA | Zip Code<br>22151 | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Paper  |             |                   | Transaction ID: D31775H4  |  |  |
| Activity or Event Identifier:<br>Administrative                                  |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 194.22        |   | 730.64           |   | 924.86       |

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Frank Parsons Paper Company |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>6715-B Electronic Drive                                       |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Springfield  | State<br>VA | Zip Code<br>22151 | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Paper & Paper Products                               |             |                   | Transaction ID: D31774H4  |  |  |
| Activity or Event Identifier:<br>Administrative                                  |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 227.22        |   | 854.80           |   | 1082.02      |

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Nuckols & Company |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>4312 Grove Ave                                      |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Richmond   | State<br>VA | Zip Code<br>23221-1802 | Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Accounting Services                        |             |                        | Transaction ID: D31612H4  |  |  |
| Activity or Event Identifier:<br>Administrative                        |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 234.93        |   | 883.82           |   | 1118.75      |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 656.37        |   | 2469.26          |   | 3125.63      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Pitney Bowes Credit Corp. |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 85460  |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Louisville   | State<br>KY | Zip Code<br>40285-5460 | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>  |  |  |
| Purpose of Disbursement:<br>Postage Machine Lease                              |             |                        | Transaction ID: D31631H4  |  |  |
| Activity or Event Identifier:<br>Administrative                                |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 273.91        |   | 1030.45          |   | 1304.36      |

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Pitney Bowes Credit Corp. |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 85460  |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Louisville   | State<br>KY | Zip Code<br>40285-5460 | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>  |  |  |
| Purpose of Disbursement:<br>Postage  |             |                        | Transaction ID: D31647H4  |  |  |
| Activity or Event Identifier:<br>Administrative                                |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 258.90        |   | 973.96           |   | 1232.86      |

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Elizabeth Pearson |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>1701 16th St NW   Apt 363                           |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Washington   | State<br>DC | Zip Code<br>20009-3115 | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>  |  |  |
| Purpose of Disbursement:<br>Mileage Reimbursement                      |             |                        | Transaction ID: D31621H4  |  |  |
| Activity or Event Identifier:<br>Administrative                        |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 27.84         |   | 104.77           |   | 132.61       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 560.65        |   | 2109.18          |   | 2669.83      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>UPS |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 7247-0244                      |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Philadelphia                                     | State<br>PA | Zip Code<br>19170 | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Shipping                     |             |                   | Transaction ID: D31763H4  |  |  |
| Activity or Event Identifier:<br>Administrative          |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 73.06         |   | 274.85           |   | 347.91       |

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>UPS |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 7247-0244                      |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Philadelphia                                     | State<br>PA | Zip Code<br>19170 | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Shipping                     |             |                   | Transaction ID: D31761H4  |  |  |
| Activity or Event Identifier:<br>Administrative          |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 33.45         |   | 125.88           |   | 159.33       |

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>UPS |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 7247-0244                      |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Philadelphia                                     | State<br>PA | Zip Code<br>19170 | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Shipping                     |             |                   | Transaction ID: D31762H4  |  |  |
| Activity or Event Identifier:<br>Administrative          |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 4.11          |   | 15.50            |   | 19.61        |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 110.62        |   | 416.23           |   | 526.85       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>UPS |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 7247-0244                      |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Philadelphia                                     | State<br>PA | Zip Code<br>19170 | Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Shipping                     |             |                   | Transaction ID: D31646H4  |  |  |
| Activity or Event Identifier:<br>Administrative          |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 4.64          |   | 17.50            |   | 22.14        |

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>UPS |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 7247-0244                      |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Philadelphia                                     | State<br>PA | Zip Code<br>19170 | Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Shipping                     |             |                   | Transaction ID: D31624H4  |  |  |
| Activity or Event Identifier:<br>Administrative          |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 4.13          |   | 15.57            |   | 19.70        |

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>UPS |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 7247-0244                      |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Philadelphia                                     | State<br>PA | Zip Code<br>19170 | Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Shipping                     |             |                   | Transaction ID: D31632H4  |  |  |
| Activity or Event Identifier:<br>Administrative          |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 66.54         |   | 250.35           |   | 316.89       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 75.31         |   | 283.42           |   | 358.73       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |                        |   |  |  |
|---|-------------|------------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Margaret Hogan |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>513 N Ivy St                                     |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Arlington   | State<br>VA | Zip Code<br>22201-1707 | Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Postage Reimbursement                   |             |                        | Transaction ID: D31620H4  |  |  |
| Activity or Event Identifier:<br>Administrative                     |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| .85           |   | 3.20             |   | 4.05         |

|   |             |                   |   |  |  |
|---|-------------|-------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>United House of Prayer |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>1206 Church St   |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Norfolk   | State<br>VA | Zip Code<br>23504 | Date <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Site Rental                                     |             |                   | Transaction ID: D31737H4  |  |  |
| Activity or Event Identifier:<br>Administrative                             |             |                   |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 52.50         |   | 197.50           |   | 250.00       |

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Lanier World Wide, Inc. |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>2300 Parklake Drive                                       |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Atlanta  | State<br>GA | Zip Code<br>30345-2814 | Date <input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Copier Lease                                     |             |                        | Transaction ID: D31785H4  |  |  |
| Activity or Event Identifier:<br>Administrative                              |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 127.88        |   | 481.11           |   | 608.99       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 181.23        |   | 681.81           |   | 863.04       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Lanier World Wide, Inc. |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>2300 Parklake Drive                                       |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Atlanta  | State<br>GA | Zip Code<br>30345-2814 | Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>Copier Lease                                     |             |                        | Transaction ID: D31653H4  |  |  |
| Activity or Event Identifier:<br>Administrative                              |             |                        |   |  |  |

|                                     |   |                                     |   |                                     |
|-------------------------------------|---|-------------------------------------|---|-------------------------------------|
| FEDERAL SHARE                       | + | NONFEDERAL SHARE                    | = | TOTAL AMOUNT                        |
| <input type="text" value="134.28"/> |   | <input type="text" value="505.15"/> |   | <input type="text" value="639.43"/> |

|   |             |                        |  |  |  |
|---|-------------|------------------------|--|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Net Telcos |             |                        | Type of Allocated Activity:<br><input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>4551 Cox Rd Ste 100                          |             |                        | Allocated Activity or Event Year-To-Date<br>0.00   |  |  |
| City<br>Glen Allen  | State<br>VA | Zip Code<br>23060-6740 | Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>   |  |  |
| Purpose of Disbursement:<br>Internet Service Fees               |             |                        | Transaction ID: D31769H4   |  |  |
| Activity or Event Identifier:                                   |             |                        |  |  |  |

|                                   |   |                                   |   |                                     |
|-----------------------------------|---|-----------------------------------|---|-------------------------------------|
| FEDERAL SHARE                     | + | NONFEDERAL SHARE                  | = | TOTAL AMOUNT                        |
| <input type="text" value="0.00"/> |   | <input type="text" value="0.00"/> |   | <input type="text" value="642.01"/> |

|  |             |                   |   |  |  |
|--|-------------|-------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Eric Flemming |             |                   | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>1324 Five Point Rd                              |             |                   | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Virginia Beach   | State<br>VA | Zip Code<br>23454 | Date <input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>  |  |  |
| Purpose of Disbursement:<br>General Political Consulting           |             |                   | Transaction ID: D31610H4  |  |  |
| Activity or Event Identifier:<br>Administrative                    |             |                   |   |  |  |

|                                     |   |                                      |   |                                      |
|-------------------------------------|---|--------------------------------------|---|--------------------------------------|
| FEDERAL SHARE                       | + | NONFEDERAL SHARE                     | = | TOTAL AMOUNT                         |
| <input type="text" value="273.00"/> |   | <input type="text" value="1027.00"/> |   | <input type="text" value="1300.00"/> |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|                                     |   |                                      |   |                                      |
|-------------------------------------|---|--------------------------------------|---|--------------------------------------|
| FEDERAL SHARE                       | + | NONFEDERAL SHARE                     | = | TOTAL AMOUNT                         |
| <input type="text" value="407.28"/> |   | <input type="text" value="1532.15"/> |   | <input type="text" value="1939.43"/> |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|                      |  |                      |  |                      |
|----------------------|--|----------------------|--|----------------------|
| FEDERAL SHARE        |  | NONFEDERAL SHARE     |  | TOTAL AMOUNT         |
| <input type="text"/> |  | <input type="text"/> |  | <input type="text"/> |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |                        |   |  |  |
|---|-------------|------------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>UpTime Solutions |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>3807 Gaskins Rd                                    |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Richmond  | State<br>VA | Zip Code<br>23233-1436 | Date MM / DD / YYYY<br>10 / 23 / 2006   |  |  |
| Purpose of Disbursement:<br>Network Contract Services                 |             |                        | Transaction ID: D31613H4  |  |  |
| Activity or Event Identifier:<br>Administrative                       |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 184.38        |   | 693.66           |   | 878.04       |

|   |             |                        |   |  |  |
|---|-------------|------------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>UpTime Solutions |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>3807 Gaskins Rd                                    |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Richmond  | State<br>VA | Zip Code<br>23233-1436 | Date MM / DD / YYYY<br>11 / 15 / 2006   |  |  |
| Purpose of Disbursement:<br>Network Contract Services                 |             |                        | Transaction ID: D31772H4  |  |  |
| Activity or Event Identifier:<br>Administrative                       |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 242.13        |   | 910.87           |   | 1153.00      |

|   |             |                        |   |  |  |
|---|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>AT&T |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>1120 20th St NW Ste 1000               |             |                        | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3406 | Date MM / DD / YYYY<br>10 / 23 / 2006   |  |  |
| Purpose of Disbursement:<br>Long Distance Phone Service   |             |                        | Transaction ID: D31615H4  |  |  |
| Activity or Event Identifier:<br>Administrative           |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 17.28         |   | 65.02            |   | 82.30        |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 443.79        |   | 1669.55          |   | 2113.34      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |       |            |   |  |  |
|---|-------|------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>AT&T |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>1120 20th St NW Ste 1000               |       |            | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City  | State | Zip Code   | Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/><br><b>Transaction ID:</b> D31614H4   |  |  |
| Washington  | DC    | 20036-3406 |   |  |  |
| Purpose of Disbursement:<br>Long Distance Phones          |       |            | Category/<br>Type   |  |  |
| Activity or Event Identifier:<br>Administrative           |       |            |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 137.61        |   | 517.70           |   | 655.31       |

|   |       |            |   |  |  |
|---|-------|------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Platinum Plus for Business |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 15469   |       |            | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City  | State | Zip Code   | Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/><br><b>Transaction ID:</b> D31686H4   |  |  |
| Wilmington  | DE    | 19886-5469 |   |  |  |
| Purpose of Disbursement:<br>Credit Card Payment                                 |       |            | Category/<br>Type   |  |  |
| Activity or Event Identifier:<br>Administrative                                 |       |            |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1270.94       |   | 4781.16          |   | 6052.10      |

|   |       |          |   |  |  |
|---|-------|----------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Brian Phillips |       |          | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>6545 Belspring Road                              |       |          | Allocated Activity or Event Year-To-Date<br>360805.22   |  |  |
| City  | State | Zip Code | Date <input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2006"/><br><b>Transaction ID:</b> D31782H4   |  |  |
| Radford   | VA    | 24141    |   |  |  |
| Purpose of Disbursement:<br>Expense Reimbursement                   |       |          | Category/<br>Type   |  |  |
| Activity or Event Identifier:<br>Administrative                     |       |          |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 216.09        |   | 812.91           |   | 1029.00      |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1624.64       |   | 6111.77          |   | 7736.41      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
| 7262.21       |  | 27320.54         |  | 34582.75     |

**SCHEDULE H5 (FEC Form 3X)  
 TRANSFERS OF LEVIN FUNDS FOR  
 SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Democratic Party of Virginia

NAME OF ACCOUNT

Levin Account

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 1 / 2 0 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

147085.28

Transaction ID: T44

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

0.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

0.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

147085.28

iv) **Generic Campaign Activity**

Total Amount Transferred for Generic Campaign Activity.....

GENERIC CAMPAIGN ACTIVITY

0.00

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....

0.00

TOTAL This Period (Voter ID).....

0.00

TOTAL This Period (GOTV).....

147085.28

TOTAL This Period (Generic Campaign Activity).....

0.00

TOTAL This Period (Total Amount of Transfers Received).....

147085.28

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |                       |  |  |
|---|-------------|-----------------------|--|--|
| <b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Landmark Strategies, Inc. |             |                       | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign  |  |
| Mailing Address<br>1029 N Royal St Ste 350  |             |                       | Allocated Activity or Event Year-To-Date<br>809900.87  |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>223145508 | Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> |  |
| Purpose of Disbursement<br>Generic GOTV Calls   |             |                       | Category/<br>Type  |  |

|                                 |   |             |   |              |
|---------------------------------|---|-------------|---|--------------|
| FEDERAL SHARE                   | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 7103.25                         |   | 26721.75    |   | 33825.00     |
| <b>Transaction ID: D31684H6</b> |   |             |   |              |

|   |             |                       |  |  |
|---|-------------|-----------------------|--|--|
| <b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Landmark Strategies, Inc. |             |                       | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign  |  |
| Mailing Address<br>1029 N Royal St Ste 350  |             |                       | Allocated Activity or Event Year-To-Date<br>809900.87  |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>223145508 | Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> |  |
| Purpose of Disbursement<br>Generic GOTV Calls   |             |                       | Category/<br>Type  |  |

|                                 |   |             |   |              |
|---------------------------------|---|-------------|---|--------------|
| FEDERAL SHARE                   | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 17850.00                        |   | 67150.00    |   | 85000.00     |
| <b>Transaction ID: D31740H6</b> |   |             |   |              |

**SUBTOTAL** of Shared Federal and Levin Activity This Page

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 24953.25      |   | 93871.75    |   | 118825.00    |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| FEDERAL SHARE        | LEVIN SHARE          | TOTAL AMOUNT         |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

**TOTAL** This Period for the Levin Share

|                      |
|----------------------|
| <input type="text"/> |
|----------------------|

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |                       |  |  |
|---|-------------|-----------------------|--|--|
| <b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Landmark Strategies, Inc. |             |                       | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign  |  |
| Mailing Address<br>1029 N Royal St Ste 350  |             |                       | Allocated Activity or Event Year-To-Date<br>809900.87  |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>223145508 | Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> |  |
| Purpose of Disbursement<br>Generic GOTV Calls   |             |                       | Category/<br>Type  |  |

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 21000.00      |   | 79000.00    |   | 100000.00    |

Transaction ID: D31685H6

|   |             |                   |  |  |
|---|-------------|-------------------|--|--|
| <b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Mack Crouse Group |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign  |  |
| Mailing Address<br>308 N View Terrace   |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87  |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>22301 | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> |  |
| Purpose of Disbursement<br>Generic GOTV Materials   |             |                   | Category/<br>Type  |  |

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 6240.95       |   | 23477.86    |   | 29718.81     |

Transaction ID: D31637H6

**SUBTOTAL** of Shared Federal and Levin Activity This Page

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 27240.95      |   | 102477.86   |   | 129718.81    |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

|               |  |             |  |              |
|---------------|--|-------------|--|--------------|
| FEDERAL SHARE |  | LEVIN SHARE |  | TOTAL AMOUNT |
|               |  |             |  |              |

**TOTAL** This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |                   |   |  |
|---|-------------|-------------------|---|--|
| <b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Mack Crouse Group |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign |  |
| Mailing Address<br>308 N View Terrace   |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87   |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>22301 | Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>  |  |
| Purpose of Disbursement<br>Generic GOTV Campaign Materials                                      |             |                   | Category/<br>Type   |  |

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 4908.15       |   | 18464.00    |   | 23372.15     |

Transaction ID: D31605H6

|   |             |                   |   |  |
|---|-------------|-------------------|---|--|
| <b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Mack Crouse Group |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign |  |
| Mailing Address<br>308 N View Terrace   |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87   |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>22301 | Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>  |  |
| Purpose of Disbursement<br>Generic GOTV Campaign Materials                                      |             |                   | Category/<br>Type   |  |

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 10145.13      |   | 38165.03    |   | 48310.16     |

Transaction ID: D31604H6

**SUBTOTAL** of Shared Federal and Levin Activity This Page

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 15053.28      |   | 56629.03    |   | 71682.31     |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

|               |  |             |  |              |
|---------------|--|-------------|--|--------------|
| FEDERAL SHARE |  | LEVIN SHARE |  | TOTAL AMOUNT |
|               |  |             |  |              |

**TOTAL** This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |                   |   |  |
|---|-------------|-------------------|---|--|
| <b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Mack Crouse Group |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign |  |
| Mailing Address<br>308 N View Terrace   |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87   |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>22301 | <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Generic GOTV Materials   |             |                   | Category/<br>Type   | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/> |

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 8629.16       |   | 32462.08    |   | 41091.24     |

Transaction ID: D31639H6

|   |             |                   |   |  |
|---|-------------|-------------------|---|--|
| <b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Mack Crouse Group |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign |  |
| Mailing Address<br>308 N View Terrace   |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87   |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>22301 | <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Generic GOTV Materials   |             |                   | Category/<br>Type   | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/> |

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 8629.16       |   | 32462.08    |   | 41091.24     |

Transaction ID: D31636H6

**SUBTOTAL** of Shared Federal and Levin Activity This Page

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 17258.32      |   | 64924.16    |   | 82182.48     |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| FEDERAL SHARE        | LEVIN SHARE          | TOTAL AMOUNT         |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

**TOTAL** This Period for the Levin Share

|                      |
|----------------------|
| <input type="text"/> |
|----------------------|

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|   |             |                   |  |  |
|---|-------------|-------------------|--|--|
| <b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Mack Crouse Group |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign  |  |
| Mailing Address<br>308 N View Terrace   |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87  |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>22301 | Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> |  |
| Purpose of Disbursement<br>Generic GOTV Mail Piece  |             |                   | Category/<br>Type  |  |

|                                 |   |             |   |              |
|---------------------------------|---|-------------|---|--------------|
| FEDERAL SHARE                   | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 8347.50                         |   | 31402.50    |   | 39750.00     |
| <b>Transaction ID: D31665H6</b> |   |             |   |              |

|   |             |                   |  |  |
|---|-------------|-------------------|--|--|
| <b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Mack Crouse Group |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign  |  |
| Mailing Address<br>308 N View Terrace   |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87  |  |
| City<br>Alexandria  | State<br>VA | Zip Code<br>22301 | Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/> |  |
| Purpose of Disbursement<br>Generic Mail Program   |             |                   | Category/<br>Type  |  |

|                                 |   |             |   |              |
|---------------------------------|---|-------------|---|--------------|
| FEDERAL SHARE                   | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 15750.00                        |   | 59250.00    |   | 75000.00     |
| <b>Transaction ID: D32817H6</b> |   |             |   |              |

**SUBTOTAL** of Shared Federal and Levin Activity This Page

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 24097.50      |   | 90652.50    |   | 114750.00    |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| FEDERAL SHARE        | LEVIN SHARE          | TOTAL AMOUNT         |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

**TOTAL** This Period for the Levin Share

|                      |
|----------------------|
| <input type="text"/> |
|----------------------|

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Democratic Party of Virginia

**A.** Full Name (Last ,First, Middle Initial) / Full Organization Name

Mack Crouse Group

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
308 N View Terrace

Allocated Activity or Event Year-To-Date

809900.87

City State Zip Code  
Alexandria VA 22301

Purpose of Disbursement  
Generic GOTV Materials

Category/  
Type

Date   /   /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

5454.21

20518.24

25972.45

Transaction ID: D31640H6

**B.** Full Name (Last ,First, Middle Initial) / Full Organization Name

McArdle Printing Com-  
pany

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
800 Commerce Drive

Allocated Activity or Event Year-To-Date

809900.87

City State Zip Code  
Upper Marlboro MD 20774

Purpose of Disbursement  
Generic GOTV Postcard Postage

Category/  
Type

Date   /   /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

1212.43

4561.05

5773.48

Transaction ID: D31688H6

**SUBTOTAL** of Shared Federal and Levin Activity This Page

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

6666.64

25079.29

31745.93

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

TOTAL AMOUNT

LEVIN SHARE

**TOTAL** This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Democratic Party of Virginia

**A. Full Name (Last ,First, Middle Initial) / Full Organization Name**

McArdle Printing Com-  
pany

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
800 Commerce Drive

Allocated Activity or Event Year-To-Date

809900.87

City State Zip Code  
Upper Marlboro MD 20774

Purpose of Disbursement  
Generic GOTV Postcard Postage

Category/  
Type

Date   /   /

FEDERAL SHARE

LEVIN SHARE

TOTAL AMOUNT

6982.34

26266.90

33249.24

Transaction ID: D31671H6

**B. Full Name (Last ,First, Middle Initial) / Full Organization Name**

Winning Directions

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
1366 San Mateo Avenue

Allocated Activity or Event Year-To-Date

809900.87

City State Zip Code  
South San Francisc CA 94080

Purpose of Disbursement  
Generic ID Calls

Category/  
Type

Date   /   /

FEDERAL SHARE

LEVIN SHARE

TOTAL AMOUNT

9103.54

34246.66

43350.20

Transaction ID: D31666H6

**SUBTOTAL of Shared Federal and Levin Activity This Page**

FEDERAL SHARE

LEVIN SHARE

TOTAL AMOUNT

16085.88

60513.56

76599.44

**TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))**

FEDERAL SHARE

LEVIN SHARE

TOTAL AMOUNT

**TOTAL This Period for the Levin Share**

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |             |                   |   |  |
|--|-------------|-------------------|---|--|
| <b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Winning Directions |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign |  |
| Mailing Address<br>1366 San Mateo Avenue   |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87   |  |
| City<br>South San Francisc   | State<br>CA | Zip Code<br>94080 | Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>  |  |
| Purpose of Disbursement<br>Generic GOTV Calls  |             |                   | Category/<br>Type   |  |

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 2333.21       |   | 8777.33     |   | 11110.54     |

Transaction ID: D31682H6

|  |             |                   |   |  |
|--|-------------|-------------------|---|--|
| <b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>Wampold Strategies |             |                   | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign |  |
| Mailing Address<br>216 11th St SE  |             |                   | Allocated Activity or Event Year-To-Date<br>809900.87   |  |
| City<br>Washington   | State<br>DC | Zip Code<br>20003 | Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>  |  |
| Purpose of Disbursement<br>Generic GOTV Postcard   |             |                   | Category/<br>Type   |  |

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 787.50        |   | 2962.50     |   | 3750.00      |

Transaction ID: D31687H6

**SUBTOTAL** of Shared Federal and Levin Activity This Page

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 3120.71       |   | 11739.83    |   | 14860.54     |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

|               |  |             |  |              |
|---------------|--|-------------|--|--------------|
| FEDERAL SHARE |  | LEVIN SHARE |  | TOTAL AMOUNT |
|               |  |             |  |              |

**TOTAL** This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Democratic Party of Virginia

**A.** Full Name (Last ,First, Middle Initial) / Full Organization Name  
Wampold Strategies

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
216 11th St SE

Allocated Activity or Event Year-To-Date

809900.87

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Generic GOTV Postcard

Category/  
Type

Date   /   /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

6247.58

23502.82

29750.40

Transaction ID: D31655H6

**B.** Full Name (Last ,First, Middle Initial) / Full Organization Name  
Wampold Strategies

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
216 11th St SE

Allocated Activity or Event Year-To-Date

809900.87

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Generic GOTV Postcard

Category/  
Type

Date   /   /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

12393.23

46622.17

59015.40

Transaction ID: D31670H6

**SUBTOTAL** of Shared Federal and Levin Activity This Page

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

18640.81

70124.99

88765.80

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

TOTAL AMOUNT

LEVIN SHARE

**TOTAL** This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |       |   |  |
|--|-------|---|--|
| <b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>McMahan Squire & Assoc |       | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign |  |
| Mailing Address  |       | Allocated Activity or Event Year-To-Date  |  |
| City   | State | Zip Code  | 809900.87  |
| Purpose of Disbursement<br>Generic GOTV Radio  |       | Category/<br>Type   | Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2006"/> |

|                                 |   |             |   |              |
|---------------------------------|---|-------------|---|--------------|
| FEDERAL SHARE                   | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 14466.69                        |   | 54422.31    |   | 68889.00     |
| <b>Transaction ID: D31668H6</b> |   |             |   |              |

|   |       |   |  |
|---|-------|---|--|
| <b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b><br>US Postmaster |       | Type of Allocated Activity or Event:<br><input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV<br><input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> Generic Campaign |  |
| Mailing Address   |       | Allocated Activity or Event Year-To-Date  |  |
| City  | State | Zip Code  | 809900.87  |
| Merrifield  | VA    | 22081   | Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/> |
| Purpose of Disbursement<br>Generic GOTV Postage   |       | Category/<br>Type   |  |

|                                 |   |             |   |              |
|---------------------------------|---|-------------|---|--------------|
| FEDERAL SHARE                   | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 2495.12                         |   | 9386.44     |   | 11881.56     |
| <b>Transaction ID: D31656H6</b> |   |             |   |              |

**SUBTOTAL** of Shared Federal and Levin Activity This Page

|               |   |             |   |              |
|---------------|---|-------------|---|--------------|
| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
| 16961.81      |   | 63808.75    |   | 80770.56     |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

|               |  |             |  |              |
|---------------|--|-------------|--|--------------|
| FEDERAL SHARE |  | LEVIN SHARE |  | TOTAL AMOUNT |
| 170079.15     |  | 639821.72   |  | 809900.87    |

**TOTAL** This Period for the Levin Share

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SchedL103

|   |
|---|
| NAME OF COMMITTEE (In Full)<br>Democratic Party of Virginia |
| NAME OF ACCOUNT<br>Levin Account                            |

|  | COLUMN A<br>TOTAL THIS PERIOD | COLUMN B<br>YEAR-TO-DATE |
|--|-------------------------------|--------------------------|
| 1. RECEIPTS FROM PERSONS   |                               |                          |
| a. Itemized.....<br>(Use Schedule L-A)                                       | 148000.00                     | 148000.00                |
| b. Unitemized.....   | 0.00                          | 0.00                     |
| c. Total.....  | 148000.00                     | 148000.00                |
| 2. OTHER RECEIPTS.....   | 0.00                          | 0.00                     |
| 3. TOTAL RECEIPTS.....<br>(Add Lines 1c and 2)                               | 148000.00                     | 148000.00                |
| 4. TRANSFERS TO FEDERAL OR<br>ALLOCATION ACCOUNT<br>(Use Schedule L-B)       |                               |                          |
| a. Voter Registration.....   | 0.00                          | 0.00                     |
| b. Voter ID.....   | 0.00                          | 0.00                     |
| c. GOTV.....   | 0.00                          | 0.00                     |
| d. Generic Campaign.....   | 0.00                          | 0.00                     |
| e. Total.....  | 0.00                          | 0.00                     |
| 5. OTHER DISBURSEMENTS.....  | 147085.28                     | 147085.28                |
| 6. TOTAL DISBURSEMENTS.....<br>(Add Lines 4e and 5)                          | 147085.28                     | 147085.28                |
| 7. BEGINNING CASH ON HAND.....<br>(for Column B, use cash as of January 1st) | 0.00                          | 0.00                     |
| 8. RECEIPTS.....<br>(from Line 3)  | 148000.00                     | 148000.00                |
| 9. SUBTOTAL.....<br>(Add Lines 7 and 8)                                      | 148000.00                     | 148000.00                |
| 10. DISBURSEMENTS.....<br>(From Line 6)                                      | 147085.28                     | 147085.28                |
| 11. ENDING CASH ON HAND.....<br>(Subtract Line 10 From Line 9)               |                               | 914.72                   |

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

|  |                                   |                             |                                       |
|--|-----------------------------------|-----------------------------|---------------------------------------|
| Use separate schedule(s) for each category of the Aggregation Page | FOR LINE NUMBER: (check only one) |                             | PAGE 734 / 742                        |
|  | <input type="checkbox"/> 4a       | <input type="checkbox"/> 4c | <input checked="" type="checkbox"/> 5 |
|  | <input type="checkbox"/> 4b       | <input type="checkbox"/> 4d |                                       |

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

|  |   |
|--|---|
| Full Name (Last, First, Middle Initial) / Full Organization Name<br><b>A. Democratic Party of Virginia Federal Account</b> | <b>Transaction ID: D32816</b><br>Date of Disbursement   |
| Mailing Address PO Box 1057  | <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2006"/> |
| City Richmond State VA Zip Code 23218  | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>Transfer to Federal Acct  | <input type="text" value="147085.28"/>  |
|  | <b>Account: Levin</b>   |

|  |                  |
|--|------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>147085.28</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>147085.28</b> |

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Page

FOR LINE NUMBER:  1a  2  
(check only one)

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

Full Name (Last, First, Middle Initial)  
**A. S Daniel Abraham**

Mailing Address 777 S Flagler Dr  
FL 15

City West Palm Beach State FL Zip Code 33401-6161

Name of Employer or Principal Place of Business  
Loews Corporation

Occupation  
Executive

**Transaction ID:**C164763  
**Date of Receipt**  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

Amount of Each Receipt this Period  
10000.00

Aggregate Year-to-Date  
10000.00

**Account:**

Full Name (Last, First, Middle Initial)  
**B. Affordable Shelter PAC**

Mailing Address 14160 Nowbrook Dr  
Suite 200

City Chantilly State VA Zip Code 20151

Name of Employer or Principal Place of Business

Occupation  
PAC

**Transaction ID:**C164728  
**Date of Receipt**  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 6

Amount of Each Receipt this Period  
5000.00

Aggregate Year-to-Date  
5000.00

**Account:**

Full Name (Last, First, Middle Initial)  
**C. AFSCME**

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

Name of Employer or Principal Place of Business

Occupation  
PAC

**Transaction ID:**C164761  
**Date of Receipt**  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

Amount of Each Receipt this Period  
10000.00

Aggregate Year-to-Date  
10000.00

**Account:**

Full Name (Last, First, Middle Initial)  
**D. Association of Trial Lawyers of America PAC**

Mailing Address 1050 31st St NW

City Washington State DC Zip Code 20007-4409

Name of Employer or Principal Place of Business

Occupation  
PAC

**Transaction ID:**C164760  
**Date of Receipt**  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6

Amount of Each Receipt this Period  
10000.00

Aggregate Year-to-Date  
10000.00

**Account:**

**SUBTOTAL** of Receipts This Page (optional) ..... **35000.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Page

FOR LINE NUMBER:  1a  2  
(check only one)

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

Full Name (Last, First, Middle Initial)  
**A. Comcast**

Mailing Address 1500 Market St

City Philadelphia State PA Zip Code 19102

Name of Employer or Principal Place of Business

Occupation Cable Co

Transaction ID: C164741  
Date of Receipt 11 / 06 / 2006

Amount of Each Receipt this Period 1000.00

Aggregate Year-to-Date 1000.00

Account:

Full Name (Last, First, Middle Initial)  
**B. Albert J Dvoskin**

Mailing Address 9302 Lee Hwy STE 300

City Fairfax State VA Zip Code 22031-6052

Name of Employer or Principal Place of Business A. J. Dvoskin & Associate-

Occupation CEO

Transaction ID: C164765  
Date of Receipt 11 / 06 / 2006

Amount of Each Receipt this Period 10000.00

Aggregate Year-to-Date 10000.00

Account:

Full Name (Last, First, Middle Initial)  
**C. Friends of Dan Szeke**

Mailing Address 904 Anadoreton Parkway

City Richmond State VA Zip Code 23226

Name of Employer or Principal Place of Business

Occupation Candidate Committee

Transaction ID: C164725  
Date of Receipt 10 / 27 / 2006

Amount of Each Receipt this Period 10000.00

Aggregate Year-to-Date 10000.00

Account:

Full Name (Last, First, Middle Initial)  
**D. Friends of Jeanette Rishell**

Mailing Address 9331 South Whitt Dr

City Washington State DC Zip Code 20011

Name of Employer or Principal Place of Business

Occupation Candidate Committee

Transaction ID: C164758  
Date of Receipt 11 / 03 / 2006

Amount of Each Receipt this Period 10000.00

Aggregate Year-to-Date 10000.00

Account:

**SUBTOTAL** of Receipts This Page (optional) ..... 31000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Page

FOR LINE NUMBER:  1a  2  
(check only one)

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

Full Name (Last, First, Middle Initial)  
**A. John Groupe**  
Mailing Address 815 Prince St  
City Alexandria State VA Zip Code 22314  
Name of Employer or Principal Place of Business  
Occupation Contractor

Transaction ID: C164732  
Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6  
Amount of Each Receipt this Period  
4000.00  
Aggregate Year-to-Date  
4000.00  
Account:

Full Name (Last, First, Middle Initial)  
**B. Franklin Hall**  
Mailing Address PO Box 3407  
City Richmond State VA Zip Code 23235-7407  
Name of Employer or Principal Place of Business Commonwealth of VA  
Occupation Minority Leader

Transaction ID: C164762  
Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6  
Amount of Each Receipt this Period  
5250.00  
Aggregate Year-to-Date  
5250.00  
Account:

Full Name (Last, First, Middle Initial)  
**C. John Henry**  
Mailing Address 54 Riverside Dr #16B  
City Nyc State NY Zip Code 10024  
Name of Employer or Principal Place of Business Self  
Occupation Writer

Transaction ID: C164733  
Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 6  
Amount of Each Receipt this Period  
10000.00  
Aggregate Year-to-Date  
10000.00  
Account:

Full Name (Last, First, Middle Initial)  
**D. IBEW Educational Committee**  
Mailing Address 1125 15th St NW  
City Washington State DC Zip Code 20005-2707  
Name of Employer or Principal Place of Business  
Occupation PAC

Transaction ID: C164784  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 6  
Amount of Each Receipt this Period  
10000.00  
Aggregate Year-to-Date  
10000.00  
Account:

**SUBTOTAL** of Receipts This Page (optional) ..... 29250.00  
**TOTAL** This Period (last page this line number only) .....

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Page

FOR LINE NUMBER:  
(check only one)  1a  2

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

Full Name (Last, First, Middle Initial)  
**A. Tammy S Murphy**

Mailing Address

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Red Bank | NJ    | 07701    |

Name of Employer or Principal Place of Business  
Self

Occupation  
Homemaker

**Transaction ID:**C164785  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 6

Amount of Each Receipt this Period  
10000.00

Aggregate Year-to-Date  
10000.00

**Account:**

Full Name (Last, First, Middle Initial)  
**B. One Virginia**

Mailing Address PO Box 1858

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Richmond | VA    | 23218    |

Name of Employer or Principal Place of Business

Occupation  
PAC

**Transaction ID:**C164757  
Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 0 6

Amount of Each Receipt this Period  
10000.00

Aggregate Year-to-Date  
10000.00

**Account:**

Full Name (Last, First, Middle Initial)  
**C. Sharon E Pandak**

Mailing Address 11230 Edgemoor Ct

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Woodbridge | VA    | 22192-1146 |

Name of Employer or Principal Place of Business  
Sands, Marks & Miller

Occupation  
attorney

**Transaction ID:**C163850  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 6

Amount of Each Receipt this Period  
10000.00

Aggregate Year-to-Date  
10000.00

**Account:**

Full Name (Last, First, Middle Initial)  
**D. Peter Hart Research Assoc**

Mailing Address 1724 Connecticut Ave NW

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20009    |

Name of Employer or Principal Place of Business

Occupation  
Polling

**Transaction ID:**C164724  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 6

Amount of Each Receipt this Period  
500.00

Aggregate Year-to-Date  
500.00

**Account:**

**SUBTOTAL** of Receipts This Page (optional) ..... **30500.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Page

FOR LINE NUMBER:  1a  2  
(check only one)

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NAME OF COMMITTEE (In Full)  
Democratic Party of Virginia

Full Name (Last, First, Middle Initial)  
**A. Pullar for Senate**  
Mailing Address PO Box 146  
City Mount Vernon State VA Zip Code 22121  
Name of Employer or Principal Place of Business  
Occupation Candidate Committee

Transaction ID: C164721  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 6  
Amount of Each Receipt this Period  
500.00  
Aggregate Year-to-Date  
500.00  
Account:

Full Name (Last, First, Middle Initial)  
**B. Judith Y Rasmussen**  
Mailing Address PO Box 229  
City Ivy State VA Zip Code 22945-0229  
Name of Employer or Principal Place of Business Self employd  
Occupation Designer to the Stars

Transaction ID: C164778  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 6  
Amount of Each Receipt this Period  
500.00  
Aggregate Year-to-Date  
500.00  
Account:

Full Name (Last, First, Middle Initial)  
**C. Rob Shinn**  
Mailing Address PO Box 85629  
City Richmond State VA Zip Code 23285-5629  
Name of Employer or Principal Place of Business CSX Corporation  
Occupation Political Development

Transaction ID: C164783  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 6  
Amount of Each Receipt this Period  
1000.00  
Aggregate Year-to-Date  
1000.00  
Account:

Full Name (Last, First, Middle Initial)  
**D. The NEA Fund for Children & Public Education Feder**  
Mailing Address 1201 16th St NW STE 421  
City Washington State DC Zip Code 20036-3207  
Name of Employer or Principal Place of Business  
Occupation PAC

Transaction ID: C164740  
Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 6  
Amount of Each Receipt this Period  
10000.00  
Aggregate Year-to-Date  
10000.00  
Account:

**SUBTOTAL** of Receipts This Page (optional) ..... 12000.00  
**TOTAL** This Period (last page this line number only) .....



Form/Schedule: **F3XA**

Transaction ID:

This amendment is in response to the Commission's letter dated April 6, 2007. Payments reported on Schedule E as independent expenditures on behalf of Bobby Scott and Phil Kellam were paid for with federally permissible funds. The expenditures were made for activities that expressly advocated the election of these candidates, however, were not made in concert or cooperation with or at the request or suggestion of the candidate, the candidate's authorized committee, or their agents. Receipts from 'Peter D Hart Research Assoc Inc,' 'Benenson Strategy Group,' and 'Predicted List, LLC,' were for voter file purchases. The prices paid for voter file purchases are established using comparable prices charged by other state party committees throughout the country on a per record cost. The exact price paid to the Committee by each entity is determined by multiplying the per record cost by the number of records provided in the file purchased, or a set price for statewide voter file, also determined by the total number of records included in the file. This is considered the 'usual and normal charge' for the good provided. The additional disbursements reported on the amendment were the result of a software error that did not correctly calculate and transmit the entire original report. While several sections, including Schedule L and Schedule B for Lines 24 and 28, were calculated correctly, Schedule B for Lines 21, 25, and 30(b) were not. The software error was discovered, and a corrected amendment was filed that included all Schedules. Payments for 'Generic GOTV Campaign Materials' and 'Generic GOTV Materials' reported on Schedule H6 were for Generic GOTV Direct Mail program printing and postage run by the Committee. A corrected Schedule E has been included with a signature and signature date of the Treasurer, attesting to the fact that these were independent expenditures. Payments for 'GOTV Worker' on Schedule E for Line 24 were for GOTV Canvassers. The coordinated payments on Schedule F have been corrected to reflect the complete information of the appropriate candidate supported.

Form/Schedule: **SB30B**

Transaction ID: **D31642**

Payment for postage for exempt mail piece featuring Jim Webb, candidate for US Senate, Virginia.

**Image# 27990041375**

Form/Schedule: **SB30B**  
Transaction ID: **D31650**

Payments to The Baughman Company were for Exempt Candidate Mail featuring Phil Kellam, candidate for the 6th district from Virginia.

Form/Schedule: **SB30B**  
Transaction ID: **D31638**

Payment to Mack Crousen Group for Exempt Grassroots Candidate Materials featured Jim Webb, candidate for US Senate from Virginia, and Andrew Hurst, candidate for 11th District US House from Virginia.

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