

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Democratic Properties Corporation-Federal

ADDRESS (number and street) 430 South Capitol Street, SE  
 Check if different than previously reported. (ACC)  
Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** C00384479  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period 09 01 2006 through 09 30 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 Bradley K. Marshall

Signature of Treasurer Electronically Filed by Bradley K. Marshall Date 10 20 2006

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 Properties Corporation-Federal

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		311212.60
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	176748.70									
(c) Total Receipts (from Line 19) .....	123494.83	1088084.79								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	300243.53	1399297.39								
7. Total Disbursements (from Line 31) .....	255797.63	1354851.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	44445.90	44445.90								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Democratic Properties Corporation-Federal

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	0.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	123044.83	1071522.12
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) .....	450.00	16562.67
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	123494.83	1088084.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	123494.83	1088084.79

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	255797.63	1328463.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	255797.63	1328463.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	26388.36
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	255797.63	1354851.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	255797.63	1354851.49

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	255797.63	1328463.13
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	450.00	16562.67
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	255347.63	1311900.46

**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 6 / 14
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Properties Corporation-Federal

**A. DEMOCRATIC CONGRESSIONAL**

Full Name (Last, First, Middle Initial)  
Mailing Address CAMPAIGN COMMITTEE  
430 SOUTH CAPITOL STREET, S.E.

City WASHINGTON State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
366599.74

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: SA12-1109

Amount of Each Receipt this Period  
25795.00

**B. DNC SERVICES CORPORATION**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 SOUTH CAPITAL ST, S.E.

City WASHINGTON State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
704922.38

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: SA12-1110

Amount of Each Receipt this Period  
60008.79

**C. DEMOCRATIC CONGRESSIONAL**

Full Name (Last, First, Middle Initial)  
Mailing Address CAMPAIGN COMMITTEE  
430 SOUTH CAPITOL STREET, S.E.

City WASHINGTON State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
366599.74

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: SA12-1108

Amount of Each Receipt this Period  
3486.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	89289.79
<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 7 / 14
	(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 Properties Corporation-Federal

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL

Mailing Address CAMPAIGN COMMITTEE  
430 SOUTH CAPITOL STREET, S.E.

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
366599.74

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2006

Transaction ID: SA12-1114

Amount of Each Receipt this Period  
33755.04

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	33755.04
<b>TOTAL</b> This Period (last page this line number only) .....	▶	123044.83

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

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

FOR LINE NUMBER: PAGE 8 / 14  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Properties Corporation-Federal

**A.** Full Name (Last, First, Middle Initial)  
FIORELLO CONSULTING

Mailing Address 3914 BARCROFT MEWS CT.

City State Zip Code  
FALLS CHURCH VA 22041

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

**Transaction ID:** SA15-1111

Amount of Each Receipt this Period  
150.00

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

Mailing Address 3914 BARCROFT MEWS CT

City State Zip Code  
FALLS CHURCH VA 22041

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

**Transaction ID:** SA15-1112

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
FIORELLO CONSULTING

Mailing Address 6\*47 BARCROFT MEWS CT

City State Zip Code  
FALLS CHURCH VA 22041

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

**Transaction ID:** SA15-1113

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

**TOTAL** This Period (last page this line number only) ..... ► **450.00**



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic Properties Corporation-Federal

Full Name (Last, First, Middle Initial) <b>A. COMCAST</b>		<b>Transaction ID:</b> SB21B-1070 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address PO BOX 3005		Amount of Each Disbursement this Period 1500.66
City SOUTHEASTERN State PA Zip Code 19398	Purpose of Disbursement Cable Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. LUIS ALVARADO</b>		<b>Transaction ID:</b> SB21B-1071 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address 2710 PROSPERITY AVENUE STE 100		Amount of Each Disbursement this Period 69.48
City FAIRFAX State VA Zip Code 22031	Purpose of Disbursement Equip/Purch. General Bldg Materials Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Atarah J. Dymally-Williams</b>		<b>Transaction ID:</b> SB21B-1072 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6
Mailing Address 1110 Fidler Lane #425		Amount of Each Disbursement this Period 90.80
City Silver Spring State MD Zip Code 20910	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1660.94
<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 10 / 14

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

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NAME OF COMMITTEE (In Full)  
Democratic Properties Corporation-Federal

Full Name (Last, First, Middle Initial) <b>A. COMCAST</b>		Transaction ID: SB21B-1073																					
Mailing Address PO BOX 3005		Date of Disbursement																					
City SOUTHEASTERN State PA Zip Code 19398		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	1		2	0	0	6														
Purpose of Disbursement Cable Services		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">1500.66</td> </tr> </table>		1500.66																			
1500.66																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) <b>B. GOVERNMENT OF THE D. C. REAL PROPERTY TAX BILL</b>		Transaction ID: SB21B-1074																					
Mailing Address OFFICE OF TAX AND REVENUE P.O. BOX 98095		Date of Disbursement																					
City WASHINGTON State DC Zip Code 20090-8095		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	1		2	0	0	6														
Purpose of Disbursement Taxes Payment		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">60008.73</td> </tr> </table>		60008.73																			
60008.73																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) <b>C. DSH MANAGEMENT</b>		Transaction ID: SB21B-1075																					
Mailing Address 1201 PENNSYLVANIA AVENUE, NW SUITE 300		Date of Disbursement																					
City WASHINGTON State DC Zip Code 20004		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	1		2	0	0	6														
Purpose of Disbursement Cleaning Maintenance		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">6661.68</td> </tr> </table>		6661.68																			
6661.68																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>68171.07</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 11 / 14

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

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NAME OF COMMITTEE (In Full)  
Democratic Properties Corporation-Federal

Full Name (Last, First, Middle Initial) <b>A. HOME PARAMOUNT</b>		<b>Transaction ID:</b> SB21B-1076 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6
Mailing Address P O BOX 75271		Amount of Each Disbursement this Period 264.37
City BALTIMORE State MD Zip Code 21275-5271	Purpose of Disbursement Maintenance Contract Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. GOVERNMENT OF THE D. C. REAL PROPERTY TAX BILL</b>		<b>Transaction ID:</b> SB21B-1078 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6
Mailing Address OFFICE OF TAX AND REVENUE P.O. BOX 98095		Amount of Each Disbursement this Period 1013.43
City WASHINGTON State DC Zip Code 20090-8095	Purpose of Disbursement Taxes Payment Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. D C TREASURER BID TAX</b>		<b>Transaction ID:</b> SB21B-1079 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6
Mailing Address P O BOX 98095		Amount of Each Disbursement this Period 7593.36
City WASHINGTON State DC Zip Code 20090-8095	Purpose of Disbursement Taxes Payment Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8871.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic Properties Corporation-Federal

**A.** DC WATER AND SEWER AUTHORITY CUSTOMER SERVICE DEPARTMENT

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 97200

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
Water & Sewage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1080

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1131.94

**B.** Engineering and Technical Consultants, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 22560 Glenn Drive, Suite 118

City Sterling State VA Zip Code 20164

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1097

Date of Disbursement

09 / 15 / 2006

Amount of Each Disbursement this Period

6532.00

**C.** WARREN-EHRT COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 610 WEST WEST STREET

City BALTIMORE State MD Zip Code 21230

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-1098

Date of Disbursement

09 / 15 / 2006

Amount of Each Disbursement this Period

123970.13

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

131634.07

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic Properties Corporation-Federal

Full Name (Last, First, Middle Initial) <b>A. DNB Contractors, Inc</b>		<b>Transaction ID: SB21B-1099</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 612 Manorbrook Drive		Amount of Each Disbursement this Period 10825.00
City Silver Spring State MD Zip Code 20910	Purpose of Disbursement Building Maintenance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. D.C. TREASURER D.C GOVT, REAL PROP.TAX BILL</b>		<b>Transaction ID: SB21B-1100</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address OFFICE OF TAX AND REVENUE P.O BOX 98095		Amount of Each Disbursement this Period 33755.04
City WASHINGTON State DC Zip Code 20090-8095	Purpose of Disbursement Taxes Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. LERCH BATES NORTH AMERICA, INC</b>		<b>Transaction ID: SB21B-1101</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 8089 SOUTH LINCOLN, SUITE 300		Amount of Each Disbursement this Period 175.00
City LITTLETON State CO Zip Code 80122	Purpose of Disbursement Elevator Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	44755.04
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Properties Corporation-Federal

Full Name (Last, First, Middle Initial) <b>A. COMPU-KLEEN INC</b>		<b>Transaction ID: SB21B-1102</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address PO BOX 189		Amount of Each Disbursement this Period 512.56
City ELMWOOD PARK	State NJ	
Zip Code 07407	Purpose of Disbursement Equip/Purch. General Bldg Materials	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RESIDEX, LLC</b>		<b>Transaction ID: SB21B-1103</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 5105 COLLEGE AVENUE		Amount of Each Disbursement this Period 185.00
City COLLEGE PARK	State MD	
Zip Code 20740	Purpose of Disbursement Equip/Purch. General Bldg Materials	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		<b>Transaction ID: SB21B-1115</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address P. O. BOX 2705		Amount of Each Disbursement this Period 7.79
City RICHMOND	State VA	
Zip Code 23261	Purpose of Disbursement Bank Charges	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	705.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	255797.63